DOCUMENT RESUME

ED 136 004	CE 010 001
AUTHOR	Bowers, Gary E.; Bowers, Margaret R.
TITLE	The Elusive Unit of Service. Project SHARE. Human Services Monograph Series. Number 1.
INSTITUTION	Aspen Systems Corp., Germantown, Md.
SPONS AGENCY	Department of Health, Education, and Welfare, Washington, D.C. Project Share.
PUB DATE	Sep 76
CONTRACT	HEW-100-75-0179
NOTE	215p.; Several charts may not reproduce well due to small type
EDRS PRICE	MF-$0.83 HC-$11.37 Plus Postage.
DESCRIPTORS	Federal Legislation; *Human Services; *Management Information Systems; *Mental Health; Program Descriptions; *Research Projects; Social Science Research; *Social Services; State Programs; *Systems Approach
IDENTIFIERS	California; Mississippi; Nebraska; New York; Utah

ABSTRACT

This monograph describes and analyzes recent efforts to develop measurable units for human services in the social services and mental health services areas. The issues surrounding the "unit of service" are examined along with the problems encountered by the system designer or information user in past projects, and some of today's more promising approaches in the development of workable systems employing units of service. Following brief sections covering introductory and background material, major content is contained under the following headings: (1) Why Units of Service? (2) Type of Units, (3) Problems in Developing Units of Service, (4) Unit-of-Service Systems, (5) Conclusions and Recommendations for Future Unit of Service Development, and (6) Bibliography. The section on unit-of-service systems (64 pages) describes, in chart and narrative form, representative unit-of-service systems in the social service and mental health fields, such as the Booz Allen Social Service Output Units and the Multi-State Information System (MSIS). An overview of current research on units of service is also presented. The seven appendixes include additional information on on unit-of-service systems. (WL)

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Human Services

NUMBER 1 SEPTEMBER 1976

MONOGRAPH SERIES

ED136004

The Elusive Unit of Service

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PROJECT SHARE

PROJECT SHARE is operated by Aspen
Systems Corporation, under DHEW
Contract No. HEW-100-75-0179

P.O. Box 2309
Rockville, Md. 20852

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INTRODUCTION

The purpose of this paper is to describe and analyze recent efforts to develop measurable units for Human Services. As the title implies, the search has been extremely frustrating. We will examine the issues surrounding the "unit of service," the problems encountered by the system designer or information user in past projects, and some of today's more promising approaches in the development of workable systems employing units of service. In keeping with the intent of a "monograph," a few of the authors' homilies on systems development are also included.

As it is used in this paper, the term "Human Services" includes Social Services and Mental Health Services but excludes Physical Health Services. The reason for this is that the field of Mental Health is at about the same stage of development,—primitive—as is the Social Services field, in the use of the service unit. In the field of Physical Health, on the other hand, there are fairly well established units for services. The units of service experiments in the Mental Health field are also quite similar to those in Social Services and each could potentially benefit from the other's experiences.

We have not provided an exhaustive bibliography tracing the history of Human Service unit development since such studies have been completed within the past six months by at least two organizations:

- Center for Social Research and Development, Denver University;
- Welfare Research Inc., New York.

Our bibliography includes only those works that contributed particularly to the ideas presented in the paper.

The conclusions and recommendations are those of the authors and do not necessarily reflect the opinions of those individuals and organizations whose systems are described in this paper.

ACKNOWLEDGEMENTS

The authors would like to acknowledge the assistance of the following individuals who contributed both their thoughts and experiences, their time and their staffs during on-site interviews, and copious written material from which we extracted much pertinent information: Evan Jones, Director of the Utah Division of Family Services; John Natteford, Deputy Director, San Joaquin County Department of Public Assistance; Bob Wright, Chief of

Management and Data Services, Nebraska Department of Public Welfare; Ed Yaw, Orange County (California) Department of Mental Health; Dr. Robert Chapman, Professor of Business Administration California State College at Fullerton; Jim Focht, Project Director, Unit of Service Cost Project, Welfare Research, Inc., New York; Ed Baumheier and Gale Whiteneck, Denver University Center for Social Research and Development; Bob Soong, Associate Director of Research and Development; Byron Stone, Director of Management Systems, National Board of YMCA; Clayton Barnett, Project Director, Mississippi Unit of Service Cost Project; Gloria Cohen and John Twiname, Mott-McDonald Associates; Russy Sumariwala, United Way of America; Dr. Bill Ford, Nebraska Department of Public Institutions; Mike Levine, Connecticut Mental Health Center; Howard Tucker, Public Service Administration; Joan Gaffney and Bob Neilson, DHEW/SRS/AAIS; and Bill Privett, Office of the Secretary, DHEW.

BACKGROUND

Over the past several years various efforts to develop units of human services have been sponsored by Federal, State and local governments, as well as by private organizations, but all have been singularly unsuccessful in creating units generally acceptable to other organizations and institutions in the field. More recently projects, however, have been initiated that show some promise. Provoked in large part by the requirements of the new Title XX of the Social Security Act and by other legislation relating to human services, several states have incorporated units into their design of information systems for both social services and mental health services. Whether these new efforts can produce results that will be able to withstand the test of time remains to be seen.

It is curious that the human services field is one of the few areas of human endeavor where there is no agreed upon unit of measurement. We are so accustomed to using units in our daily life that we give them little or no thought. In the supermarket, "three for a dollar" and "45¢ per pound" are accepted measures, as are taxi-cab charges per meter mile, gas and electric meter units, dollar per hour paychecks, miles per hour, and revolutions per minute. All of these are widely used without too much disagreement on their basic units.

Most businesses and industries can measure their output by units:

- number of cars produced;
- number of gallons gas sold;
- barrels per day of oil pumped;
- miles of cable laid;
- tons of coal mined.

These output units can also readily be tied to a dollar value. Unit prices help us to estimate how much we will spend, how much we can afford and enable us to compare what we will get for our dollar from different suppliers of services.

For most goods and services the payment is made by the item or the unit. We do not pay the grocer for the labor involved in producing the apple, we pay him for the apple or for the pound of apples. We do not pay the store for the labor involved in making the shirt, we pay for the shirt. Similarly, we do not pay the tennis pro for waiting time between lessons; we pay him only for our own hour of instruction.

Certain fields more closely related to social services, i.e., physical health services, education, and legal services, have had far greater success in arriving at measurable units.

Physical Health Services are Reflected By:

Physicians services
- By type—one examination, one operation
- By time—one hour office visit, one hour of treatment

Hospital In-Patient Services by days
- One hospital day

Out-Patient Services, by time, by type
- One treatment or hour of treatment

Educational Services are Measured In:
- College units, credits or hours
- Grade school days or hours

Legal Services are Billed In:

Time
- One hour of consultation

Document preparation by type
- A contract
- A will

Procedure by type
- A title search
- An incorporation filing

Since these fields have been able to develop units, why then have other human service areas experienced such difficulty in developing acceptable units? In fact, is a unit really needed at all for social and mental health services? The next section will attempt to answer this question.

WHY UNITS OF SERVICE?

Why is it important to have units of service? Who needs them? Who uses them and for what?

Units of service can be of immense value to individuals responsible for managing services, for those who deliver the services, and for the consumer of services. The unit of service potentially has value to all levels of supervision within a service delivery organization; the case work supervisor can more effectively judge staff performance; the division head in a county agency can plan and budget between departments those services to be offered; the chief administrative officer can more accurately match services to citizen's needs.

All levels of service management must be concerned with the cost of services. The unit provides the basic ingredient to measure the amount of what has been provided to a service recipient, and, in turn, what happened as a result of providing the service. It should be the ultimate "yardstick" whereby comparisons are made, relative worth evaluated, and should constitute the primary basis for many of the decisions that face the Human Service manager. Some of the units more important functions will be:

PROGRAM NEEDS ASSESSMENT

Needs assessment is an integral part of all Human Service programs. While the formal methodology for such assessments is as rudimentary as service unit theory, each depends upon the other. Citizens needs are often expressed as a problem related to service requirements, i.e., a child that has been neglected (the problem) and needs Foster Care Services (the service requirement). Assessment of the nature of the need (or problem) involves a detailed analysis to which knowledge of the units of service available and the unit outcomes expected can contribute greatly.

EXAMPLE:

A Family Service organization has analyzed all Foster Care Service for children in a community over the past three years. 130 children were placed in Foster Care during the preceding 6 months (130 placements), 210 during the previous year and 375 in the year prior to that. Although the figure for the year just past seemed to indicate a declining need for Foster

Care based on the current mid-year statistics, the need appears to be increasing.

PLANNING

Knowledge of the number of units potentially available for each service provides the planner with an accurate means to project the number of people that can be served with each type of service during the next planning period.

EXAMPLE:

2500 unit hours of Day Care services will be available during the next year in agency X. At an average of 250 units per child, the agency will be able to serve approximately 100 children.

BUDGETING

The assignment of staff time, and the allocation of indirect costs and overhead can be assessed better on a unit of service basis. In the budgetary sense, a unit measures "how much" service is to be delivered.

EXAMPLE:

Organizational Division X will be budgeted for 1,750 homemaker hours for the next quarter, and 250 counseling sessions. The homemaker hour has a unit cost of $2.50 and the counseling $12.00 per session, including worker time, indirect cost and overhead, therefore the Budget for this division will be approximately $7,375.

ALLOCATING CASE WORKER TIME

Knowledge of the various abilities of one's staff is a basic requirement of the manager. Units of service can provide a measurement of the comparative delivery capability of each staff member. While number of cases is often the basis for evaluating of staff performance, the unit can disclose detailed information that will assist the casework supervisor in a better use of case worker resources.

EXAMPLE:

One case may entail only minimum arranging and referral activity, while another case may mean months of work to complete one adoption. If estimates of the units involved in each were available, assigning cases by required unit would be far more equitable, both to the caseworker and the supervisor.

COST ACCOUNTING

Collecting costs by the units of service provides a basis for comparing detailed budgeted costs for each service, with actual expenditures—a major ingredient in the management decision-making process. Cost accounting by the unit also produces over time an accurate rate for each service unit that can be used for future budgeting and contract rate negotiation with other service providers.

EXAMPLE:

A state Social Service department has established over a period of time that the actual cost, including allocation of all overhead costs, for providing counseling services to unwed parents is $6.83 per hour. The state has a legislative 'freeze' on hiring, but needs identified for counseling services exceeds the capacity of the department. Negotiations are undertaken to use private organizations for counseling with restrictions on costs not to exceed the $6.83 per hour unit established within the department.

REPORTING

Human Services organizations may have many reporting requirements since they are usually funded by multiple sources, each with a different set of procedures and in many cases, service definitions. A well-defined unit of service, supported by a good system for aggregating and sorting information, eases the reporting burden both for line workers and management.

EXAMPLE:

Funding source "A" requires periodic reporting of the total number of individuals receiving Family Planning services. Funding source "B" wants to know how many people were offered such services, how many arranged for family planning services, and how many were actually provided services. Source "C" wants to know the staff time spent in setting up the service, and what type of services were provided. A single unit of service system can be utilized to respond to all of these reporting requirements.

A COMMUNICATION DEVICE

As important as the accountability and management considerations is the service units role in describing what Human Services are all about. Many of the problems discussed in Section V stem from a lack of agreement as to what a service is, and what it is supposed to do.

EXAMPLE:

While some consensus might be reached as to the need for Homemaker services in a given community, numerous questions remain to be answered: are professionally trained or unskilled workers qualified to render the service? Do their activities include training? cleaning? cooking? child care? who is the recipient—the whole family? the person who is unable to tend the home? the children? Since development of a unit of service system requires specific detailed definition of services, service activities and components, there would be no doubt about what the Homemaker service is once this definition has been agreed upon by all parties involved.

PROGRAM EVALUATION

A program may be evaluated from the following three aspects:

1. Did it accomplish the intended results?
2. Were the costs and time spent in achieving the results consistent with that which was planned?
3. How could the program be improved?

The "product" or output unit can be an excellent measure of intended results. The Planning or input unit is a basic ingredient of the cost of services that are provided under a program, and the time expended in the provisioning. Comparing the results (product units) with the time and cost factors that produced them (input units) can be a significant indicator of where improvements can be made to the program.

TYPES OF UNITS

Units of Service in the Human Service field are usually of four basic types:

Type 1—The *time* unit, i.e., one *hour* of homemaker service, one *day* of day care for children

Type 2—The *episode/activity* unit, i.e., one *counseling session*, one *arrangement*, one *contact*

Type 3—The *material* unit, i.e., one *meal*, one *contraceptive device*

Type 4—The *outcome* unit, i.e., one (1) *placement*, one (1) *substitute home* found.

Types 1, 2 and 3 are units relating to the *provisioning* of the service (or *input units*). Type 4, the *"outcome" unit*, measures the *results* of the service, or *"output" units.*

INPUT UNITS

Applications of the three types of input units varies depending upon any number of factors, but the over-riding consideration is whether or not the unit of measure applies to that service provided by the service worker or that service received by the client.

As an example, a service worker may spend 5 hours arranging for a homemaker to visit a client. The unit might either be expressed as Type 1—a time unit, 5 hours of homemaker service provided by the worker, or as Type 2—an activity unit, one arrangement for homemaker service received by the client, or both. Depending on which unit is chosen, the cost per unit of homemaker service will vary a great deal, and if organizations are compared using these two types of units, one "activity" unit will cost the same as 5 "time" units, or 5 "activity" units will cost 5 times as much as 5 "time" units. If the type of unit is not clearly identified, any comparison can be very misleading.

Further complications arise when the service recipient is in a group situation. A day care center may employ 2 individuals who provide service for an 8 hour day to 15 children. The unit may be recorded as 16 units (hours) of day care provided by the center or 240 units (hours) of day care received by the children (15 children, 16 hours of employee time) or as 1 unit (1 day) of service received by one child. This may seem somewhat strange, but many units of service systems are set up to record in an individual record what services were received. Dividing the two case workers' 8 hour day among 15 children would be more difficult arithmetically than merely recording that each child received 2 days of day care service.

Some of the most recent experiments are using both approaches. They record activity both for the delivery of the service and for services received by the client.

OUTCOME UNIT

Use of the output unit varies considerably with the type of services. If the delivery of the service produces an obvious result, such as is the case with adoption services, the unit is recorded in the record of services provided to the particular recipient, (in this case, the adopted child) as one (1) legalized adoption. If, however, an activity of adoption services is the recruitment of adoptive homes, one (1) substitute home found is the "outcome" unit, but it is not, at that time necessarily related to any client. Situations such as this present problems in how to collect the data. Other potential problems with the use of outcome units are discussed in the New York State Experiment, Section VI.

PROBLEMS IN DEVELOPING UNITS OF SERVICE

The problems that have surrounded unit of service development are by no means simple in nature. They involve the total array of administrative, political and programmatic functioning. In a situation where solving problems for one organization creates new problems for another, it is difficult to explain the type of consensus that is necessary to build a usable unit of service system.

Nevertheless, each problem is solvable, and some recent legislative impetus and organizational initiatives provide hope that the problems described in this section are, in fact, surmountable.

PROBLEM I—LACK OF SERVICE OBJECTIVES

The precise purpose of Social Services has not been agreed upon by the institutions who provide the services, or by the general public who foot a large part of the bill for such services. How then can the services be defined and their units of measurement agreed upon?

In the physical health field, sick people want to get well, healthy people want to stay healthy. Educational services are provided to prepare people for jobs and to teach them to function in the community. Legal services are provided usually to help settle disputes or to document a given circumstance. Opinions as to the purpose of Social Services, however, vary widely.

State informations systems projects spawned by Title XX are unique in that they must provide information related to the five Social Services goals required by the law:

- Self support
- Self sufficiency
- Protection of children and adults
- Community based care
- Institutional care

Title XX also required that states periodically prepare a Comprehensive Annual Service Program (CASP) plan describing what services are offered, their objectives, and how they relate to the five national goals. States are

STATE CODE ☐☐

Form 2A

SOCIAL SERVICES PROVIDED TO PRIMARY RECIPIENTS

Social Services	TITLE XX				
	AFDC			Income Eligibles	
	No. adult recipients	No. child recipients	Total cost	No. adult recipients	No. child recipients
Adoption Services					
Chore Services					
Congregate Meals					
Day Care Services for Adults					
Day Care Services for Children					
Education & Training Services					
Employment Services					
Family Planning Services					
Foster Care Services					
Foster Family Home Special Services					
Health-Related Services					
Home Delivered Meals					
Homemaker Services					
Home Management Services					
Housing Improvement Services					
Recreational Services					
Social Group Services					
Transportation Services					
Other Services (List below)					

SRS-CSA-13A

EXHIBIT 1

PERIOD ENDING
☐☐ MO ☐☐ YR

QUARTERLY ☐
YEARLY ☐
CHECK ONE

Form 2A

SOCIAL SERVICES PROVIDED TO PRIMARY RECIPIENTS

	TITLE XX					
ervices	AFDC			Income Eligibles		
	No. adult recipients	No. child recipients	Total cost	No. adult recipients	No. child recipients	Total cost
r Adults						
r Children						
Services						
vices						
Special Services						
ces						
s						
rvices						
Services						
s						
s						
ces						
(below)						

EXHIBIT 1

OMB-83R0312

STATE CODE

☐☐

Form 4A

GOAL STATUS OF PRIMARY SOCIAL SERVICES RECIPIENTS

SELF-SUPPORT

Goal Status	TITLE XX					
	AFDC	SSI			Income Eligibles	Medicaid
		Aged	Blind	Disabled		
	No. recipients	No. recipients	No. recipients	No. recipients	No. recipients	No. recipients
GOAL—SELF SUPPORT Goal Continued From Previous Quarter						
Goal Initiated						
Transferred from Another Goal						
Goal Achieved—Services Continuing						
Goal Maintained						
Goal Not Achieved—Services Continued						
Goal Achieved—Services No Longer Needed						
Goal Terminated						
Transferred to Another Goal						
Goal Achieved—Transferred to Another Goal						

SRS-CSA-15A

EXHIBIT 2

QUARTER ENDING

☐☐ MO. ☐☐ YR.

Form 4A

GOAL STATUS OF PRIMARY SOCIAL SERVICES RECIPIENTS

SELF-SUPPORT

	TITLE XX						TITLE IV
al Status	AFDC	SSI			Income Eligibles	Medicaid	AFDC Win
		Aged	Blind	Disabled			
	No. recipients	No. recipients	No. recipients	No. recipients	No. recipients	No. recipients	No. recipients
ORT om Previous Quarter							
nother Goal							
rvices Continuing							
—Services Continued							
rvices No Longer Needed							
ther Goal							
ransferred to Another Goal							

EXHIBIT 2

OMB-83R0312

also required to estimate the number of individuals to be served and the cost for each service. The plan must be made available for public comment 90 days prior to its implementation.

The Social Services Reporting Requirements (SSRR) introduced in support of Title XX ask for information on the number of "Primary Recipients" and other recipients receiving a service, the cost of each service during a reporting quarter and the numbers of primary recipients (A Primary Recipient is an individual who has been assigned one of the five national goals.) achieving the five goals (see Exhibits 1 and 2, forms 2A and 4A of the SSRR).

In effect, the SSRR requires a unit of service for reporting. That unit is an individual who has received a service one or more times during the quarter. While this unit is less than satisfactory for local management purposes, it does aid in providing a broad indicator of the national Social Service picture.

PROBLEM 2—POOR SERVICE DEFINITIONS

A great deal of current activity in the human service field revolves around correcting the "fuzzy" definitions that organizations and citizens have been struggling with for Human Services. Good definitions of services must precede defining the unit and finding out the cost of the unit.

Both public and private organizations are now engaged in detailed examinations of their service definitions, in an attempt to dispel some of the confusion of the past.

PUBLIC AGENCY SERVICE DEFINITIONS

One major impact of the Title XX requirements for a plan and for subsequent services reporting has been a decided sharpening of the definitions for social services offered under this program. Public hearings on the plans have provided citizens and other service delivery organizations an opportunity to argue the merits of the proposed services. Without fairly precise service definitions, discussion about the plan has proven difficult. As a result, definitions in the second year Title XX plans are much clearer as to what the services are, what results they are intended to achieve, and who is eligible for them.

New or improved information systems development has also been initiated in nearly all states and many counties. These include systems for collecting client service delivery data, and information about the costs of services.

The more precise service definitions coupled with a push toward obtaining timely information about social services creates a more favorable environment whereby units of service can be developed in the public sector with a reasonable chance of gaining acceptance in the field that has been missing to date.

PRIVATE AGENCY SERVICE DEFINITIONS

Parallel developments in the private/voluntary organizations are also tending to improve chances for producing workable units of service. New

EXHIBIT 3

PROGRAM CLASSIFICATION STRUCTURE FOR NATIONAL YMCA—MANAGEMENT INFORMATION SYSTEM

FIELD OF SERVICE	PROGRAM FUNCTIONS	
1000 *Health & Physical Education*	1100	Aquatic Instruction
	1200	Fitness
	1300	Recreational Skills & Sports
	1400	Competitive Athletics
	1500	Health Education
	1600	Special Education/Handicapped
	1700	Health Clubs
	1800	Self-Development Skills
2000 *Guidance & Counseling*	2100	Individual Counseling
	2200	Group Counseling
	2300	Crisis Intervention
	2400	Psychological Testing
3000 *Neighborhood & Community Services*	3100	Day Care
	3200	Outreach
	3300	Employment Service
	3400	Justice Advocacy
	3500	Community Development
	3600	Collaborative Services
	3700	Social Adjustment
4000 *Outdoor & Environmental Education*	4100	Residence Camp
	4200	Day Camp
	4300	Special Interest Camp
	4400	School Camp
	4500	Family Camp
	4600	Special Needs Camp
	4700	Ecology Awareness
5000 *Education & Training*	5100	Vocational Training
	5200	Formal Education
	5300	Special Education
	5400	Informal Education
	5500	Tutorial
6000 *Residence & Related Services*	6100	Residence
	6200	Food Service
	6300	Ancillary Services
7000 *Social Recreation/ Cultural Arts*	7100	Drop-In Centers
	7200	Cultural Enrichment
	7300	Special Interest Groups
	7400	Clubs
8000 *Human Relations*	8100	Inter-Group Understanding
	8200	Family Life Program
	8300	International Understanding
	8400	Self & Group Identity
9000 *General & Administration*		

legislation relating to private/voluntary agencies requires the filing of annual reports similar to profit-making corporations, and, in some states, agencies are also required to furnish statistics regarding people served and costs related to direct service delivery and overhead.

As a result, the AICPA (American Institute of Certified Public Accountants), produced a revised edition of the "Standards of Accounting and Financial Reporting for Voluntary Health and Welfare Organizations," (known as the "black book") which sets out rules for voluntary organizations to produce their annual accounting statement in a form that shows revenue and expenditures in relation to function or services of the organizations. Previously, such statements usually indicated only "line item" categories, i.e., salaries, materials, income sources and the like.

To collect this type of data there must be general agreement among the parties collecting the data and those supplying the data, whether they be employees of the aggregating or contracting organization, as to what the functions or services are, what components are being paid for, and what worker activities relate to what services.

A fairly exhaustive effort undertaken by a private organization as a result of the new legislation was the formulation of the Program Classification System (PCS) developed by the National YMCA (see Exhibit 3). This structure is primarily a grouping of services and programs offered by the 2000 local operating units of the "Y," with only minimal attempts at service and service unit definitions, although that is envisioned as the next step. It has not been fully tested and some local "Y" 's have reservations, but it represents the first step in a long process towards describing what they do and provides a basis for producing meaningful national statistics about their services. It was perhaps more difficult for the "Y" to do this than it might have been for other voluntary organizations with less diversified programs, and a more concentrated focus, such as the National Homemaker/Home Health Organization or Family Service Organization.

PROBLEM 3—NO COMMON LANGUAGE OF SERVICES

A close relative to the problem of service definitions *within* organizations and programs is the problem of a common language of service or taxonomy *between* organization and programs. Work on the latter has accelerated in the past year and HEW's recent analysis of fifty states' Title XX services indicates that it is taking steps to provide some leadership in the development of a new national Human Services taxonomy.

TITLE XX SERVICES ANALYSIS

Under the sponsorship of HEW/SRS, a project to analyze the service definitions contained in the 50 state Title XX Comprehensive Annual Services Program (CASP) Plans has just been completed. The approach to this effort was to use as a baseline the service definitions in the Federal Social Services Reporting Requirements (SSRR), which were developed by SRS. The services and definitions from the state plans were compared against the SSRR services and definitions as to their components, activities, elements, limitations and special conditions. Those services offered by states but not defined in the SSRR were analyzed using the same method. An example of one of the service analyses is shown in Exhibit 4.

EXHIBIT 4

HOMEMAKER SERVICES

TOTAL ENTRIES—64

Titles used by States

(28) Homemaker Services
(5) Respite Care
(3) Homemaker for Adults
(2) Homemaker/Home Health Aide
(2) Homemaker for Families and Children
(1 each) Homemaker—Adults; Homemaker—Children; Homemaker—Families; Homemaking; Homemaker—Aged and Disabled; Homemaker and/or Trainer/Chore Services for DD Persons in Semi-Independent Living; Homemaker and Chore; Chore and/or Homemaker; Home Management, Homemaker and Chore; Homemaker/Chore Service/Home Health Aide; Homemaker and Home Health Aide; Homemaker—Health Aide; Homemaker, Caretaker and Aide; Homemaker and Aide; Home Health Aide; Homemaker—Home Health Services; Home Health Services; Emergency Homemaker; Housekeeper; Home Maintenance; Respite Care for Developmentally Disabled Persons; Companion; Special Care for Children in Their Own Home

ACTIVITIES	COMPONENTS OF ACTIVITIES
Case Management	***Case Management***
	(7) Assess needs
	(1) Individual assessment
	(1) Social diagnosis, assessment and evaluation
	(4) Counseling
	(4) Arrange
	(1) Authorize
	(2) Evaluate
	(2) Counseling on use of resources
	(4) Information
	(3) Referral
Care	***Care***
(26) Personal care	(3) Bathing
(7) Care	(2) Hair care
(7) Child care	(2) Dressing
(7) Temporary care	(1) Foot care
(4) Supervision of child	(1) Feeding
(3) Supplementary care	(1) Shaving
(2) Substitute care	(1) Toileting assistance
(2) Short-term care	(1) Massages
(2) Supervisory care	(1) Rub-downs
(2) Non-medical care	(1) Exercising
(2) Skilled assistance	
(2) In-home assistance	
(2) Emergency care	
(1) Emergency surrogate care	

EXHIBIT 4 (con'td.)
HOMEMAKER SERVICES

ACTIVITIES **COMPONENTS OF ACTIVITIES**

Care (continued)

(1) Non-nursing care
(1) Intensive care
(1) Day care
(1) Companion services

Home Care

(16) Home management
(10) Home maintenance
(7) Household tasks
(7) Housekeeping
(6) Household management
(5) Family management
(3) Household care
(2) Homemaking tasks
(2) Supervision
(1) Homemaker assistance
(1) Home help
(1) Household activity
(1) Chore services
(2) Household budget management
(1) Financial management
(1) Money management

Health Care

(3) Health care
(1) Carry out health care recommendations
(1) Carry out physician's instructions
(1) Nursing care
(1) Assist visiting nurses
(1) Medical regimen
(1) Assist administer medication
(1) Care for surgical dressings
(1) Prepare special meals
(1) Personal health services
(1) Rehabilitation services
(1) Preventive services

Placement

(1) Temporary placement
(1) Foster care placement
(1) Emergency shelter
(1) Twenty-four hour care

ACTIVITIES	COMPONENTS OF ACTIVITIES
Instruction	***Instruction***
(21) Instruction/Teaching	(8) Home management
(1) Demonstration	(8) Child care/rearing
(1) Guidance	(5) Home maintenance
(1) Educational services	(5) Household budget

EXHIBIT 4 (con'td.)

HOMEMAKER SERVICES

COMPONENTS OF ACTIVITIES

(5) Nutrition
(5) Hygiene/health
(4) Personal care
(3) Household/home care
(3) Homemaking
(3) Food preparation
(3) Consumer education
(2) Self-care
(1) Housekeeping skills
(1) Supportive function
(1) Supervision
(1) Parenting skills
(1) Social skills

Other Activities

(3) Temporary relief
(2) Relief
(1) Professionally directed services
(1) Paraprofessional activities
(1) Homehelper services
(1) Provide parental models
(1) Parenting skills
(1) Prevention of family break-up
(2) Report to agency
(2) Observe for protective purposes
(1) Evaluate for protective purposes
(1) Assistance to provider to upgrade skills
(1) Community education programs
(12) Transportation
(1) Escort

SUPPORTIVE/SUBORDINATE ACTIVITIES

(6) Medical care/services
(5) Remedial care/services
(4) Board
(3) Room
(3) Health services

GENERAL LIMITATIONS FOR ENTIRE SERVICE

By Whom

(30) Trained homemaker
(21) Supervised homemaker
(5) Professionally supervised homemaker
(4) Agency trained homemaker
(4) Aide
(3) Homemaker
(3) Supervised health aide
(3) Qualified paraprofessionals
(3) Home health aide
(2) Health aide
(2) Volunteers
(1) Professionally trained homemaker

EXHIBIT 4 (con'td.)

HOMEMAKER SERVICES

(1) Qualified homemaker
(1) Housekeeper
(1) Specially trained staff
(1) Personnel trained in health techniques and homemaking
(1) Nursing aides
(1) Other responsible adult
(1) Relatives or neighbors meeting department standards

Location

(38) In home
(2) In foster homes
(1) In natural home
(1) In residential facility
(1) In group home
(1) Out-of-home

Standards

(5) Services must meet standards
(3) Delivered in accordance with established recommended standards

Purpose

(26) To enable individuals to strengthen their functioning in the home
(23) To enable individuals to maintain their functioning in the home
(22) To enable individuals to safeguard their functioning in the home

As of this writing, a set of 35 services common to at least 10 or more states with similar components have been identified (see Exhibit 5). The project's next step was to formulate service definitions based upon the most frequently appearing elements, components and limitations. This project may serve as a starting point for HEW to sponsor additional efforts that will lead to establishing a national taxonomy of Human Services. To be successful, this effort must involve people from all states, professional organizations, schools of social work, administrative personnel and especially the line staff who deliver the services.

EXHIBIT 5

TITLE XX SERVICES PLANNED BY STATES

NO. OF LISTINGS	ASSIGNED SERVICE DESCRIPTORS
42	Adoption Services
3	*Advocacy Services
12	*Case Management Services
37	Chore Services
8	*Community Planning Services
1	**Community Services
1	**Consulting Service
57	Counseling Services

EXHIBIT 5 (con'td.)

TITLE XX SERVICES PLANNED BY STATES

NO. OF LISTINGS	ASSIGNED SERVICE DESCRIPTORS
30	Day Care Services for Adults
56	Day Care Services for Children
14	Day Care Services (Various Categories)
20	Diagnosis and Evaluation Services
29	Education and Training Services—General and Employment-Related
92	Education, Training and Treatment Services—Specialized
23	Emergency Services
60	Employment Services
10	*Family Life Services
52	Family Planning Services
17	Foster Care Services for Adults
33	Foster Care Services for Children
21	Foster Care Services (Various Categories)
53	Health Related Services
36	Home Delivered/Congregate Meals Services
64	Homemaker Services
46	Home Management Services
35	Housing Improvement Services
48	Information and Referral Services
2	*Inmate Services
1	**Interpreter Service
37	Legal Services
1	**Outreach Services
3	*Parole and Probation Services
30	Placement Services
1	**Prenatal and Postpartum Care, Training and Counseling
34	Protective Services for Adults
46	Protective Services for Children
18	Protective Services (Various Categories)
3	*Public Awareness/Education Services
29	Recreational Services
31	Residential Care Services
1	**Residential Services
24	Residential Treatment Services
1	**Secure Money Entitlements and Other Benefits
4	*Services to Maintain Community Residency
18	Services to Unmarried Parents
27	Socialization Services
1	**Social Rehabilitation Services
1	**Special Services for Adults
12	*Special Services for Alcohol and Drug Abusers
5	*Special Services for the Blind
10	*Special Services for Children and Youth

EXHIBIT 5 (con'td.)

TITLE XX SERVICES PLANNED BY STATES

NO. OF LISTINGS	ASSIGNED SERVICE DESCRIPTORS
11	*Special Services for the Disabled
16	*Special Services for Juvenile Delinquency
1	**Sustenance
15	*Transitional Services
45	Transportation Services
3	*Volunteer Services

* Services listed less than 17 times, but more than once

** Services listed only once and not seeming to fit under other descriptors

COMMON LANGUAGE IN THE PRIVATE SECTOR

Probably the most well known of these common language efforts is the United Way of America's UWASIS (United Way of America Services Identification System, see Appendix A). This document, sub-titled "People and Programs Need Uniform and Comparable Definitions," has had the widest usage in both public and private organizations looking for a "Common Language" for human services. Programs and services are defined within a framework of six major goals: Adequate Income and Economic Opportunity, Optimal Environmental Conditions and Provision of Basic Material Needs, Optimal Health, Adequate Knowledge and Skills, Optimal Personal and Social Adjustment and Development, Adequately Organized Social Instrumentalities.

UWASIS also suggests units called "program products" for many of their services. As the name indicates this unit is mainly output oriented, i.e., "unduplicated count of persons served in a year," and thus resembles the information required in the HEW/SRS Social Services Reporting Requirements. However, some of the UWASIS program products also include the input unit or provider type measurement, i.e., "total number of hour of counseling in a year."

UWASIS is currently being revised by United Way of America based upon a sizeable volume of inputs from users. Hopefully, the revision will reflect some of the field experiences with UWASIS service units, if, in fact, any such experiences have occurred.

PROBLEM 4—POOR UNIT DEFINITIONS

Many of the same problems encountered in defining services have recurred in developing service units, since the units developed by experiments have, so far directly corresponded to a service component or activity.

An experimental effort to develop units in the private sector was sponsored by The Community Fund of Chicago during 1970–1. They designed and tested a candidate system to support their annual allocation of donated funds, which included establishing and measuring units of services provided by their participating agencies.

EXHIBIT 6

COMMUNITY FUND

LIST OF SERVICES

A. CHILD CARE SERVICES

A05 – Adoption Services
A10 – Day Care Services–General
A15 – Day Care Services–Special
A20 – Foster Family Care
A25 – Group Care for Children–Casework
A30 – Group Care for Children–Comprehensive
A35 – Group Care for Children–Emergency (Infants)
A40 – Group Care for Children–Institutional
A45 – Group Home Care
A50 – Protective Services for Children

B. FAMILY AND INDIVIDUAL SERVICES

B05 – Congregate Care–Ex-prisoners
B10 – Congregate Care–Homeless & Transients
B15 – Family & Individual Counseling
B20 – Family Life Education
B25 – Homemaker Services
B30 – Legal Aid Services
B35 – Maternity Home Services
B40 – Sheltered Workshops
B45 – Vocational Counseling and Placement
B50 – Vocational Preparation and Job Training

C. HEALTH SERVICES

C05 – Congregate Care–Aged and Chronically Ill
C10 – Coordinated Home Care Services
C15 – Emergency Room Care
C20 – Health Education
C25 – Home Nursing Services
C30 – Hospital In-patient Care
C35 – Outpatient Clinic Care–Dental
C40 – Outpatient Clinic Care–General
C45 – Outpatient Clinic Care–mental
C50 – Preventive Maternal and Child Health Services

D. NEIGHBORHOOD AND COMMUNITY CENTER SERVICES

D05 – Camping Services–Day
D10 – Camping Services–Resident
D15 – Group Services–Social Development
D20 – Group Services–Social Rehabilitation
D25 – Neighborhood Development and Organization
D30 – Physical Education and Athletics
D35 – Supplementary Education
D40 – Troop-Type Services

E. OTHER

E05 – Community Welfare Planning–Research & Central Services
E10 – Training & Recruitment of Professionals and Volunteers

"Service Profiles" were developed in five separate service areas of service (see Exhibit 6). The profiles included "volumes of services" currently being provided persons served, days of service, etc. Examples of the units used were a 'Child Care Day,' a 'Camper Day,' one 'Troop Meeting,' one 'Group Session.' A test was conducted using the agencies providing the "Neighborhood and Community Center Services" category of service, Category D, which involved measuring the number of units provided, hours of personnel time and cost of service component. This data was collected for each type of service in the category and reports were produced showing total units by service, average units per agency, average unit cost and average unit cost per agency (see Exhibits 7, 8 and 9). The system operated manually although it was eventually to be computerized. The test discovered that the agencies had great difficulty relating to the unit definition as well as other elements of the system and were not equipped to participate in so sophisticated a process.

A similar experiment was tried by the YMCA in Chicago. (The Chicago branches of the voluntary agencies are the largest in the country and they have done much of the innovation in systems development in that field.) Using the Program Classification System (PCS) as their service base and using numbers of participants as units, they recorded data at three local operating units on all individuals using the facility and participating in programs. The results were similar to those experienced in the Community Fund Project. The combination of overkill by the designers and under-readiness by the participants caused both of these projects to be abandoned —the designers were too far ahead of their time.

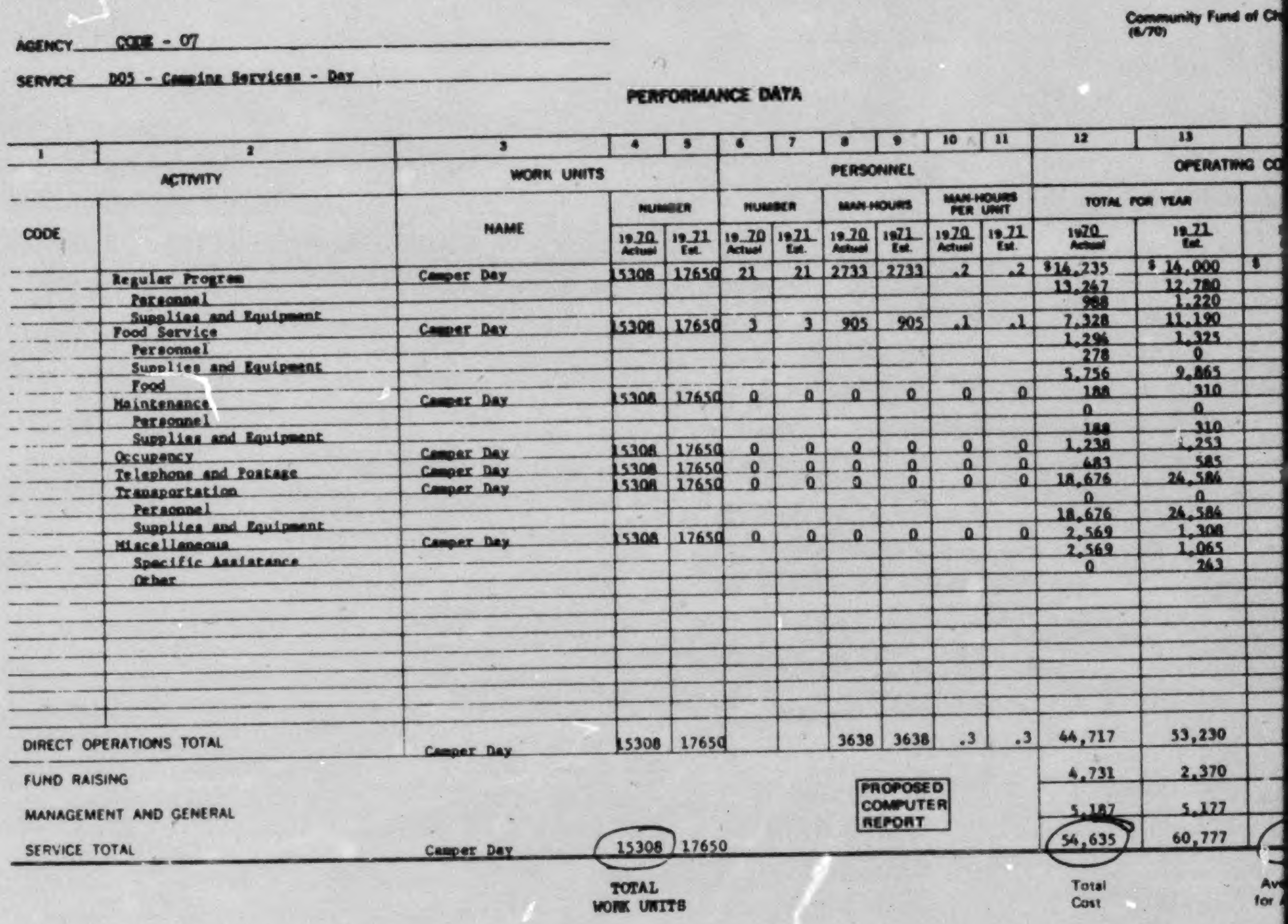
Similar efforts by public agencies are described later in Section VI.

PROBLEM 5—LACK OF DATA

Perhaps the primary barrier to defining services, or units, is the lack of data from which to draw examples or conclusions. The agencies providing Human Services have not been required by the funding bodies to supply detailed information about their services, a condition causing the postponement or often the elimination of data collecting on the service delivery process. Without some minimal information base, it is hard to compare offices or states, what is provided, to whom, and with what results? Only when detailed information is kept on services planned and provided can we begin to know specifically what an agency does and what has happened to the agency's client. This is not to say that a detailed paper-shuffling process will be permanently required; but rather that we must establish what *is*, before we determine what can and should be.

PROBLEM 6—NO PUBLIC "PRICING" OF SERVICES

Social Services are not generally purchased directly by the public, and thus, there is no set "price" per service. Although recipients sometimes pay for services, the fee depends more on their income than on the service's actual cost.



Community Fund of Ch
(6/70)

AGENCY CODE - 07

SERVICE D05 - Camping Services - Day

PERFORMANCE DATA

1	2	3	4	5	6	7	8	9	10	11	12	13	
ACTIVITY		WORK UNITS			PERSONNEL						OPERATING CO		
CODE		NAME	NUMBER		NUMBER		MAN-HOURS		MAN-HOURS PER UNIT		TOTAL FOR YEAR		
			19 70 Actual	19 71 Est.	19 70 Actual	19 71 Est.	19 70 Actual	19 71 Est.	19 70 Actual	19 71 Est.	19 70 Actual	19 71 Est.	
	Regular Program	Camper Day	15308	17650	21	21	2733	2733	.2	.2	$14,235	$ 14,000	$
	Personnel										13,247	12,780	
	Supplies and Equipment										988	1,220	
	Food Service	Camper Day	15308	17650	3	3	905	905	.1	.1	7,328	11,190	
	Personnel										1,296	1,325	
	Supplies and Equipment										278	0	
	Food										5,756	9,865	
	Maintenance	Camper Day	15308	17650	0	0	0	0	0	0	188	310	
	Personnel										0	0	
	Supplies and Equipment										188	310	
	Occupancy	Camper Day	15308	17650	0	0	0	0	0	0	1,238	1,253	
	Telephone and Postage	Camper Day	15308	17650	0	0	0	0	0	0	683	585	
	Transportation	Camper Day	15308	17650	0	0	0	0	0	0	18,676	24,586	
	Personnel										0	0	
	Supplies and Equipment										18,676	24,584	
	Miscellaneous	Camper Day	15308	17650	0	0	0	0	0	0	2,569	1,308	
	Specific Assistance										2,569	1,065	
	Other										0	263	
DIRECT OPERATIONS TOTAL		Camper Day	15308	17650			3638	3638	.3	.3	44,717	53,230	
FUND RAISING											4,731	2,370	
MANAGEMENT AND GENERAL											5,187	5,177	
SERVICE TOTAL		Camper Day	15308	17650							54,635	60,777	

PROPOSED COMPUTER REPORT

TOTAL WORK UNITS

Total Cost

Ave
for A

EXHIBIT 7

Community Fund of Chicago, Inc.
(6/70)

vices - Day

PERFORMANCE DATA

	3	4	5	6	7	8	9	10	11	12	13	14	15
	WORK UNITS			PERSONNEL						OPERATING COSTS			
	NAME	NUMBER		NUMBER		MAN-HOURS		MAN-HOURS PER UNIT		TOTAL FOR YEAR		AVERAGE COST PER UNIT	
		1970 Actual	1971 Est.	1970 Actual	1971 Est.	1970 Actual	1971 Est.	1970 Actual	1971 Est.	1970 Actual	1971 Est.	1970 Actual	1971 Est.
	Camper Day	15308	17650	21	21	2733	2733	.2	.2	$14,235	$ 14,000	$ .93	$ .79
										13,247	12,780		
										988	1,220		
uipment	Camper Day	15308	17650	3	3	905	905	.1	.1	7,328	11,190	.48	.63
										1,296	1,325		
										278	0		
uipment										5,756	9,865		
	Camper Day	15308	17650	0	0	0	0	0	0	188	310	.01	.02
										0	0		
										188	310		
uipment	Camper Day	15308	17650	0	0	0	0	0	0	1,238	1,253	.08	.07
	Camper Day	15308	17650	0	0	0	0	0	0	483	585	.03	.03
tage	Camper Day	15308	17650	0	0	0	0	0	0	18,676	24,586	1.22	1.39
										0	0		
										18,676	24,586		
uipment	Camper Day	15308	17650	0	0	0	0	0	0	2,569	1,308	.17	.07
										2,569	1,065		
tance										0	243		
	Camper Day	15308	17650			3638	3638	.3	.3	44,717	53,230	2.92	3.00
										4,731	2,370	.31	,13
										5,187	5,177	.34	.29
	Camper Day	15308	17650							54,635	60,777	3.57	3.42

PROPOSED
COMPUTER
REPORT

TOTAL
WORK UNITS

Total
Cost

Average Cost
for Agency 07

EXHIBIT 7

Community Fund of Ch
(6/71)

AGENCY CODE - 07

SERVICE D05 - Camping Services-Day

PERFORMANCE DATA FEEDBACK REPORT

(1) ACTIVITIES (Cost Centers)	(2) WORK UNIT	(3) TOTAL WORK UNITS	(4) AGENCY WORK UNITS	(5) AGENCY PER CENT	(6) TOTAL COST	(7) AGENCY COST	(8) AGENCY PER CENT	(9) AVERAGE COST PER UNIT	(10) AVERAGE COST PER AGENCY	(AG C PER
Regular Program	Camper Day	63,291	15,308	24.2	$104,456	$14,235	13.6	$ 1.65	$ 1.87	$
Food Service	"	63,291	15,308	24.2	8,491	7,328	86.3	.13	.14	
Maintenance	"	63,291	15,308	24.2	8,800	188	2.1	.14	.24	
Occupancy	"	63,291	15,308	24.2	32,542	1,238	3.8	.51	.63	
Telephone & Postage	"	63,291	15,308	24.2	5,685	483	8.5	.09	.10	
Transportation	"	63,291	15,308	24.2	51,995	18,676	35.9	.82	.76	1
Miscellaneous	"	63,291	15,308	24.2	7,573	2,569	33.9	.12	.14	
Direct Operations	"	63,291	15,308	24.2	219,542	44,717	20.4	3.46	3.88	2
Management and General	"	63,291	15,308	24.2	32,323	5,187	16.0	.51	.54	
Fund Raising	"	63,291	15,308	24.2	25,840	4,731	18.3	.41	.40	
Service Total	"	63,291	15,308	24.2	277,705	54,635	19.7	4.38	4.82	3

Total Average Cost
All Agencies

Total A
Ag

PROPOSED
COMPUTER
REPORT

EXHIBIT 8

Community Fund of Chicago, Inc.
(6/71)

ping Services-Day

PERFORMANCE DATA FEEDBACK REPORT

	(2) WORK UNIT	(3) TOTAL WORK UNITS	(4) AGENCY WORK UNITS	(5) AGENCY PER CENT	(6) TOTAL COST	(7) AGENCY COST	(8) AGENCY PER CENT	(9) AVERAGE COST PER UNIT	(10) AVERAGE COST PER AGENCY	(11) AGENCY COST PER UNIT	(12) VARIANCE
	Camper Day	63,291	15,308	24.2	$104,456	-$14,235	13.6	$ 1.65	$ 1.87	$ .93	$ (.72)
	"	63,291	15,308	24.2	8,491	7,328	86.3	.13	.14	.48	.35
	"	63,291	15,308	24.2	8,800	188	2.1	.14	.24	.01	(.13)
	"	63,291	15,308	24.2	32,542	1,238	3.8	.51	.63	.08	(.43)
	"	63,291	15,308	24.2	5,685	483	8.5	.09	.10	.03	(.06)
	"	63,291	15,308	24.2	51,995	18,676	35.9	.82	.76	1.22	.40
	"	63,291	15,308	24.2	7,573	2,569	33.9	.12	.14	.17	.05
	"	63,291	15,308	24.2	219,542	44,717	20.4	3.46	3.88	2.92	(.54)
ral	"	63,291	15,308	24.2	32,323	5,187	16.0	.51	.54	.34	(.17)
	"	63,291	15,308	24.2	25,840	4,731	18.3	.41	.40	.31	(.32)
	"	63,291	15,308	24.2	277,705	54,635	19.7	4.38	4.82	3.57	(1.03)

Total Average Cost
All Agencies

Total Average Cost
Agency 07

PROPOSED
COMPUTER
REPORT

EXHIBIT 8

Community Fund of
June, 1971

UNIT COST COMPARATIVE ANALYSIS

SERVICE D05 - Camping Services-Day

(1) AGENCY CODE	(2) WORK UNIT	(3) TOTAL WORK UNITS	(4) AGENCY WORK UNITS	(5) AGENCY PER CENT OF WORK UNITS	(6) TOTAL COST	(7) AGENCY COST	(8) AGENCY PER CENT OF TOTAL COST	(9) AVERAGE COST PER UNIT	(10) AGENC COST PER U
01	Camper Day	63,291	4,870	7.7%	$ 277,705	$ 18,100	6.5%	$ 4.38	$ 3.7
02	"	63,291	2,350	3.7	277,705	11,718	4.2	4.38	4.9
03	"	63,291	3,215	5.1	277,705	12,404	4.4	4.38	3.8
04	"	63,291	7,605	12.0	277,705	31,894	11.5	4.38	4.2
05	"	63,291	3,664	5.8	277,705	11,073	4.0	4.38	3.0
06	"	63,291	2,890	4.6	277,705	8,905	3.2	4.38	3.0
07	"	63,291	15,308	24.2	277,705	54,635	19.7	4.38	3.5
08	"	63,291	10,269	16.2	277,705	94,904	34.2	4.38	9.2
09	"	63,291	13,120	20.7	277,705	34,072	12.3	4.38	2.6
TOTALS			63,291	100.0%		$277,705	100.0%		

Average co

Variance Explanations

01 - Does not provide activities with .64 unit cost
02 - Does not provide activities with .87 unit cost
03 - Does not provide activities with .65 unit cost
04 - Does not provide activities with .14 unit cost
05 - Does not provide activities with .09 unit cost
06 - Does not provide activities with .65 unit cost
07 - Provides All Activities
08 - Does not provide activities with .13 unit cost
09 - Does not provide activities with .13 unit cost

PROPOSED
COMPUTER
REPORT

EXHIBIT 9

Community Fund of Chicago, Inc.
June, 1971

UNIT COST COMPARATIVE ANALYSIS

Services-Day

	(3) TOTAL WORK UNITS	(4) AGENCY WORK UNITS	(5) AGENCY PER CENT OF WORK UNITS	(6) TOTAL COST	(7) AGENCY COST	(8) AGENCY PER CENT OF TOTAL COST	(9) AVERAGE COST PER UNIT	(10) AGENCY COST PER UNIT	(11) VARIANCE
ay	63,291	4,870	7.7%	$ 277,705	$ 18,100	6.5%	$ 4.38	$ 3.71	$ (.03)
	63,291	2,350	3.7	277,705	11,718	4.2	4.38	4.98	1.47
	63,291	3,215	5.1	277,705	12,404	4.4	4.38	3.85	.12
	63,291	7,605	12.0	277,705	31,894	11.5	4.38	4.20	(.04)
	63,291	3,664	5.8	277,705	11,073	4.0	4.38	3.04	(1.25)
	63,291	2,890	4.6	277,705	8,905	3.2	4.38	3.07	(.66)
	63,291	15,308	24.2	277,705	54,635	19.7	4.38	3.57	(.81)
	63,291	10,269	16.2	277,705	94,904	34.2	4.38	9.22	4.97
	63,291	13,120	20.7	277,705	34,072	12.3	4.38	2.60	(1.65)
		63,291	100.0%		$277,705	100.0%			

Average cost per Agency 07

ations

ide activities with .64 unit cost
ide activities with .87 unit cost
ide activities with .65 unit cost
ide activities with .14 unit cost
ide activities with .09 unit cost
ide activities with .65 unit cost
ctivities
ide activities with .13 unit cost
ide activities with .13 unit cost

PROPOSED
COMPUTER
REPORT

EXHIBIT 9

PROBLEM 7—UNIQUE NATURE AND COMPOSITION OF THE SERVICES

Most of the services that fall into the category of "social" services are "family substitute" type services, i.e., day care for children and adults, foster care, homemaker services, etc. In the recent past, these functions were performed by the family, not the government or other outside agency. Most other human services have been provided outside family for a much longer time—education services, health services, legal services, transportation, etc. As Social Services are the least institutionalized of publicly-delivered services in the human service field (*See* Kamerman and Kahn), it is probably unreasonable to expect them to be as well-defined as the older services. Only at this stage in the formalization of these services has there been a concentrated effort to define service units and determine the unit costs or rates for each type of service.

PROBLEM 8—LACK OF PROJECT CONTINUITY IN EXPERIMENTAL EFFORTS

To fully develop and validate operational service units, organizations must commit themselves to completing their experiments. Most past efforts have lacked that commitment to continuity and have been terminated too early to provide useful data or to establish a solid base for continuing research in their localities.

PROBLEM 9—LINKAGE OF UNIT DEVELOPMENT WITH WORKER EFFICIENCY MEASUREMENT

Most of the previous experiments with units have used the time-based unit, and most of the data was derived from time expended by workers, as recorded on a time card or similar form. Although in many cases there was no plan to measure worker efficiency, many workers thought it would be an inevitable outcome of the experiment.

It is difficult to determine exactly how this affected the integrity of the workers' data, but it is reasonable to assume that the data would have been more valid if not perceived as potentially threatening.

In the Booz-Allen test (see Section VI), the workers felt that their efficiency was being measured and they suggested adding other units, in addition to the units directly related to services, which included hours of case management and units of information and referral (expressed in "contacts" or "instances"). According to the test report, adding units to account fully for worker time increased employee support.

PROBLEM 10—LACK OF SYSTEMS DESIGNERS WHO UNDERSTAND THE "WHOLE" OF THE UNIT OF SERVICE SYSTEM

Developing service units involves assembling data from sources which often operate independently within organizations. To see these components working together as a system requires experience with each component and the ability to comprehend the larger implications of the whole. Usually work assignments in social service organizations are limited to one or two areas and very few people have dealt with all the sub-systems that ultimately contribute to the complete unit-of-service system.

PROBLEM 11—LACK OF SUPPORTING SYSTEMS IN PLACE

The definition of units and development of unit reporting should be the last features of a social service information system to be implemented. Designing and implementing a basic information system for Human Services has proven difficult enough, without adding the extra burden of the service unit. Many human services information systems have just now developed to the point where units of service design is feasible. An overriding majority, however, have not progressed even that far.

PROBLEM 12—INADEQUATE TEST OF A SYSTEM

The tendency of system designers, pressed by time and short on resources, is to rush into a full-blown implementation without a thorough "wringing out" of the concept under real-life conditions. As a result, many systems have "gone under" or been faced with costly re-design that could have been avoided.

PROBLEM 13—LACK OF INFORMATION USE BY MANAGEMENT

Because the service unit system is a relatively new concept, management has not fully capitalized upon the resulting output for planning or program evaluation. Managers and supervisors are used to planning in terms of number of people, their salaries, and related costs, and not by the volume of services either rendered by the organizations or received by its clients, or the relationship of the services to client satisfaction.

UNIT OF SERVICE SYSTEMS

The purpose of this section is to describe representative unit-of-service systems in the Social Services and Mental Health fields, and to provide an overview of current research on that subject.

The projects described are intended to show a current cross-section of unit-of-service usage; the list, however, is in no way inclusive. Many public and private organizations use units to some degree, but the ones described seemed to give the broadest picture of unit usage in various types of organizations.

Our intention was to select systems so that there would be county-based and state-based systems in both Social Services and Mental Health, at least one system that included unit costs, and that all four types of units would be discussed. (Section IV describes the four types of units.) The authors accept full responsibility for the descriptions of the systems and for observations made about them.

The systems to be described are:

Social Service Unit-of-Service Systems
- Booz-Allen Social Service Output Units
- San Joaquin County (California) Social Services Information System
- State of Utah, Department of Social Services, Social Services Information System
- State of Nebraska Social Service Information System

Mental Health Unit-of-Service Systems
- Orange County (California) Mental Health Management Information System
- Multi-State Information System (MSIS)

Unit-of-Service Research Projects
- New York State Unit of Service Cost Project
- State of Mississippi Unit of Service Cost Project

SOCIAL SERVICE UNIT-OF-SERVICE SYSTEMS

BOOZ-ALLEN SOCIAL SERVICE OUTPUT UNITS

Booz-Allen Public Administration Service, Inc. assisted by Touche-Ross

& Company developed and tested a scheme of service units under a "National Service Reform" contract funded by HEW/SRS in 1972–73. In the design phase, representatives from State and local private organizations worked closely with SRS/Community Services Administration (now Public Services Administration) personnel.

The contractor, utilizing inputs from this group and their own state-of-the-art survey, produced a list for testing forty-nine services units related to 17 services (see Exhibit 10). They attempted to focus on what they considered output units, although many of their units are, according to current definitions, input units (see Section V for description of types of units).

The plan was to test the 49 units in two sites—one with an established Social Service Information System and one with no system and no on-going data collection system. Budgetary constraints limited the test to one site, a regional social service delivery area in Texas which did not have an information system in place. The unit data was collected over a four week period on a "Worker Weekly Log" (see Exhibit 11). Summaries of data were made on the Service Unit Summary Sheet (see Exhibit 12). The actual summary of units reported during the test period is shown in Exhibit 13.

A thorough evaluation of the test results was conducted at the test site with the participation of line, supervisory and administrative staff.

In general, although the workers felt the units were easy to record, and that the experiment was useful, they did not believe the units employed accurately reflected all of their activities. They recommended that additional units of the following type be added:

- administrative or indirect service activities such as resource development and provider certification
- units to cover activities with non-eligible persons and persons without service plans
- units to reflect information and referral activities
- units to reflect counseling activities.

As a result of these inputs from the workers and other inputs from the advisory group, a final list of service units was developed for potential future usage (Exhibit 10).

PROS AND CONS OF THE BOOZ-ALLEN APPROACH

Pros

- A useful experiment solely for its research value
- The study has been a building block for many other efforts
- Inter-organizational involvement in designing the approach added validity to the test results
- Focus on output units enabled a good test of both the definitions and utility of the concept

Cons

- Experiment was too limited, by time, resources and number of sites. As too often occurs in Federally-funded projects, the funding "players"

EXHIBIT 10

SERVICE	RECOMMENDED OUTPUT UNITS
Homemaker Service	• One hour—homemaker service • One arrangement—homemaker service
Housing Improvement	• One arrangement—for relocation, ownership or housing improvemen • One relocation—rental or ownership • *One housing improvement
Home Management & Other Functional Educational Services	• One individual session-instructional/training • One group session—instructional/training • One arrangement—home management & other functional education
Family Planning	• One medical contraceptive service—supply or procedure • One arrangement—social, educational or medical services for family • One individual session—education, social, information • One group session—education, social, information
Foster Care Services for Children	• One child returned to own home or other permanent living arrangem • One placement—foster care home or group care facility • **One month of supervision
Transportation	• ***One one-way trip • One arrangement—transportation services

* Includes identifying sub-standard housing, improving landlord tenant relations, preventing evictions or directly a obtain housing improvements.

** Includes work with natural parents, foster parents, and child.

*** Can be individual or group; direct provision, or money given for transportation.

EXHIBIT 10

VICE	RECOMMENDED OUTPUT UNITS
	• One hour—homemaker service
	• One arrangement—homemaker service
nt	• One arrangement—for relocation, ownership or housing improvement
	• One relocation—rental or ownership
	• *One housing improvement
& Other tional Services	• One individual session-instructional/training
	• One group session—instructional/training
	• One arrangement—home management & other functional educational services
	• One medical contraceptive service—supply or procedure
	• One arrangement—social, educational or medical services for family planning
	• One individual session—education, social, information
	• One group session—education, social, information
s for Children	• One child returned to own home or other permanent living arrangement
	• One placement—foster care home or group care facility
	• **One month of supervision
	• ***One one-way trip
	• One arrangement—transportation services

g sub-standard housing, improving landlord tenant relations, preventing evictions or directly assisting client to
provements.
natural parents, foster parents, and child.
or group; direct provision, or money given for transportation.

EXHIBIT 10 (cont'd)

SERVICE	RECOMMENDED OUTPUT UNITS
Day Care Services for Children	• One arrangement—any type of care • One full-time day—in-home care • One full-time day—care outside child's own home • One part-time day—in-home care • One part-time day—care outside child's own home
Chore Services	• One arrangement—chore services • One hour—chore services
Day Care Services for Adults	• One day—any type of day care • One arrangement—day care services
Home Delivered or Congregate Meals	• One preparation and delivery of a meal—client's own home • One preparation of a meal—central dining facility • One arrangement—home delivered or congregate meals
Protective Services for Adults	• One investigation which substantiates neglect, abuse, or exploitation • One investigation which does not substantiate neglect, abuse, or ex • One resolution of hazardous living situation or condition
Special Services for the Blind	• One session (group or individual) training/education for client or car • One aid/appliance • One arrangement—specialized services or aids for blind

EXHIBIT 10 (cont'd)

ERVICE	RECOMMENDED OUTPUT UNITS
r Children	• One arrangement—any type of care • One full-time day—in-home care • One full-time day—care outside child's own home • One part-time day—in-home care • One part-time day—care outside child's own home
	• One arrangement—chore services • One hour—chore services
or Adults	• One day—any type of day care • One arrangement—day care services
Congregate	• One preparation and delivery of a meal—client's own home • One preparation of a meal—central dining facility • One arrangement—home delivered or congregate meals
for Adults	• One investigation which substantiates neglect, abuse, or exploitation • One investigation which does not substantiate neglect, abuse, or exploitation • One resolution of hazardous living situation or condition
r the Blind	• One session (group or individual) training/education for client or caretaker • One aid/appliance • One arrangement—specialized services or aids for blind

EXHIBIT 10 (cont'd)

SERVICE	RECOMMENDED OUTPUT UNITS
Employment Services	• One diagnostic assessment • One arrangement—any type of training, diagnostic assessment or
Foster Care for Adults	• One placement—foster care home • One month of supervision • One arrangement for foster care
Health Related Services (Physical and Mental Health)	• One arrangement—to secure needed health services (includes ad • One placement—medical institutions and other health related facilit • One supportive counseling session
Protective Services for Children	• One unsubstantiated investigation • One investigation substantiating abuse, neglect, or exploitation • One resolution*—court action • One resolution*—parental intervention • One month of supervision
Educational Services	• One arrangement—educational training

* Resolution—amelioration of situation of abuse, neglect, or exploitation.

EXHIBIT 10 (cont'd)

VICE	RECOMMENDED OUTPUT UNITS
s	• One diagnostic assessment
	• One arrangement—any type of training, diagnostic assessment or job placement
lts	• One placement—foster care home
	• One month of supervision
	• One arrangement for foster care
ices ntal Health)	• One arrangement—to secure needed health services (includes admissions)
	• One placement—medical institutions and other health related facilities
	• One supportive counseling session
for Children	• One unsubstantiated investigation
	• One investigation substantiating abuse, neglect, or exploitation
	• One resolution*—court action
	• One resolution*—parental intervention
	• One month of supervision
s	• One arrangement—educational training

tion of situation of abuse, neglect, or exploitation.

EXHIBIT 10 (cont'd)
OUTPUT UNIT DEFINITIONS

Arrangement—Formal or informal agreement by another agency or resource to provide a service to the client of the public social service agency. This would include only purchased services and services at no cost to the public social service agency, and does not include internal agency arrangements. An arrangement differs from a referral in that the worker must have direct assurance from the outside agency or resource that services will definitely be provided to the individual for whom the arrangement is being made.

Placement—Establishment of an individual client in a living situation (foster care home, half-way house, group care facility, etc.) or long term treatment facility (mental institution, nursing home, etc.), as a direct result of agency efforts.

Session—A focused contact with a client (up to one day in duration), the purpose of which is usually education, instruction, or training in a particular service area.

Month of Supervision (Foster Care and Protective Services)—The provision of this output unit requires that over the period of a month a service worker must have at least one direct contact with the client.

Day Care Services—For children, a full-time day of day care is defined to be care of 5 hours or longer in a 24 hour period. For children, a part-time day of care is care for less than 5 hours in a 24 hour period. For adults, a day of care is defined to be care of 8 hours or longer in a 24 hour period. If adult care is provided for less than eight hour periods, the number of days should be calculated by aggregating hours of care into x number of 8 hour days.

changed and the new ones had other priorities for research projects and did not extend this one

- Ignoring input or worker time units limited the use of the study as a test vehicle
- No related cost system that would parallel the unit system was developed
- The test was an "overlay," that is, it was not part of a system design that would continue in use, thereby leaving open the question of credibility of the research results.

SAN JOAQUIN COUNTY (CALIFORNIA) SOCIAL SERVICES INFORMATION SYSTEM

The San Joaquin County Social Services Information System (SSIS) is operated by the Social Services Bureau of the County Department of Public Assistance. The Bureau is responsible for administrating Title XX Social

EXHIBIT 11

SERVICE WORKER WEEKLY LOG

1. SERVICE WORKER NAME ____________________

2. WEEK ________ **TO** ________

3. P

4. DATE	5. CASE IDENTIFIER	6. SERVICE UNIT CODE	7. NUMBER OF UNIT(S)

CHORE SERVICE
01 ONE ARRANGEMENT—CHORE SERVICES
02 ONE HOUR—CHORE SERVICES

DAY CARE—ADULTS
03 ONE DAY—ANY TYPE OF DAY CARE
04 ONE ARRANGEMENT—DAY CARE SERVICES

DAY CARE—CHILDREN
05 ONE ARRANGEMENT—ANY TYPE OF CARE
06 ONE FULL-TIME DAY—IN-HOME CARE
07 ONE FULL-TIME DAY—CARE OUTSIDE CHILD'S OWN HOME
08 ONE PART-TIME DAY—IN-HOME CARE
09 ONE PART-TIME DAY—CARE OUTSIDE CHILD'S OWN HOME

EDUCATIONAL SERVICES
10 ONE ARRANGEMENT—EDUCATIONAL TRAINING

EMPLOYMENT SERVICES
11 ONE DIAGNOSTIC ASSESSMENT
12 ONE ARRANGEMENT—ANY TYPE OF TRAINING, DIAGNOSTIC ASSESSMENT OR JOB PLACEMENT

FAMILY PLANNING
13 ONE MEDICAL CONTRACEPTIVE SERVICE—SUPPLY OR PROCEDURE
14 ONE ARRANGEMENT—SOCIAL, EDUCATIONAL OR MEDICAL SERVICES FOR FAMILY PLANNING
15 ONE INDIVIDUAL SESSION—EDUCATION, SOCIAL, INFORMATION
16 ONE GROUP SESSION—EDUCATION, SOCIAL, INFORMATION

FOSTER CARE—ADULTS
17 ONE PLACEMENT—FOSTER CARE HOME
18 ONE MONTH OF SUPERVISION
19 ONE ARRANGEMENT FOR FOSTER CARE

FOSTER CARE—CHILDREN
20 ONE CHILD RETURNED TO OWN HOME OR OTHER PERMANENT LIVING ARRANGEMENT
21 ONE PLACEMENT—FOSTER CARE HOME OR GROUP CARE FACILITY
22 ONE MONTH OF SUPERVISION

HEALTH-RELATED SERVICES
23 ONE ARRANGEMENT—TO SECURE NEEDED HEALTH SERVICES (INCLUDES ADMISSIONS)
24 ONE PLACEMENT—MEDICAL INSTITUTIONS AND OTHER HEALTH RELATED FACILITIES
25 ONE SUPPORTIVE COUNSELING SESSION

HOME DELIVERED/CONGREGATE MEALS
26 ONE PREPARATION AND DELIVERY OF A MEAL—CLIENT'S OWN HOME
27 ONE PREPARATION OF A MEAL—CENTRAL DINING FACILITY
28 ONE ARRANGEMENT—HOME DELIVERED OR CONGREGATE MEALS

HOMEMAKER SERVICE
29 ONE HOUR—HOMEMAKER SERVICE
30 ONE ARRANGEMENT—HOMEMAKER SERVICE

HOME MANAGEMENT/FUNCTIONAL EDUCATION
31 ONE INDIVIDUAL SESSION—INSTRUCTIONAL/TRAINING
32 ONE GROUP SESSION—INSTRUCTIONAL/TRAINING
33 ONE ARRANGEMENT—HOME MANAGEMENT AND OTHER FUNCTIONAL EDUCATIONAL SERVICES

HOUSING IMPROVE
34 ONE ARRANGEM RELOCATION, C HOUSING IMPR
35 ONE RELOCATI OWNERSHIP
36 ONE HOUSING

PROTECTIVE SERVIC
37 ONE INVESTIGA SUBSTANTIATES EXPLOITATION
38 ONE INVESTIGA NOT SUBSTANT OR EXPLOITATI
39 ONE RESOLUTI LIVING SITUATI

PROTECTIVE SERVIC
40 ONE UNSUBSTA INVESTIGATION
41 ONE INVESTIGA SUBSTANTIATIN OR EXPLOITATI
42 ONE RESOLUTI
43 ONE RESOLUTI INTERVENTION
44 ONE MONTH OF

SPECIAL SERVICE—
45 ONE SESSION (INDIVIDUAL) TR FOR CLIENT OR
46 ONE AID/APPLI
47 ONE ARRANGEM SERVICES OR A

TRANSPORTATION
48 ONE ONE-WAY
49 ONE ARRANGEM TRANSPORTATIO

EXHIBIT 11

SERVICE WORKER WEEKLY LOG

2. WEEK ________ TO ________

3. PAGE ________ OF ________

6. SERVICE UNIT CODE	7. NUMBER OF UNIT(S)

CHORE SERVICE

01 ONE ARRANGEMENT—CHORE SERVICES
02 ONE HOUR—CHORE SERVICES

DAY CARE—ADULTS

03 ONE DAY—ANY TYPE OF DAY CARE
04 ONE ARRANGEMENT—DAY CARE SERVICES

DAY CARE—CHILDREN

05 ONE ARRANGEMENT—ANY TYPE OF CARE
06 ONE FULL-TIME DAY—IN-HOME CARE
07 ONE FULL-TIME DAY—CARE OUTSIDE CHILD'S OWN HOME
08 ONE PART-TIME DAY—IN-HOME CARE
09 ONE PART-TIME DAY—CARE OUTSIDE CHILD'S OWN HOME

EDUCATIONAL SERVICES

10 ONE ARRANGEMENT—EDUCATIONAL TRAINING

EMPLOYMENT SERVICES

11 ONE DIAGNOSTIC ASSESSMENT
12 ONE ARRANGEMENT—ANY TYPE OF TRAINING, DIAGNOSTIC ASSESSMENT OR JOB PLACEMENT

FAMILY PLANNING

13 ONE MEDICAL CONTRACEPTIVE SERVICE—SUPPLY OR PROCEDURE
14 ONE ARRANGEMENT—SOCIAL, EDUCATIONAL OR MEDICAL SERVICES FOR FAMILY PLANNING
15 ONE INDIVIDUAL SESSION—EDUCATION, SOCIAL, INFORMATION
16 ONE GROUP SESSION—EDUCATION, SOCIAL, INFORMATION

FOSTER CARE—ADULTS

17 ONE PLACEMENT—FOSTER CARE HOME
18 ONE MONTH OF SUPERVISION
19 ONE ARRANGEMENT FOR FOSTER CARE

FOSTER CARE—CHILDREN

20 ONE CHILD RETURNED TO OWN HOME OR OTHER PERMANENT LIVING ARRANGEMENT
21 ONE PLACEMENT—FOSTER CARE HOME OR GROUP CARE FACILITY
22 ONE MONTH OF SUPERVISION

HEALTH-RELATED SERVICES

23 ONE ARRANGEMENT—TO SECURE NEEDED HEALTH SERVICES (INCLUDES ADMISSIONS)
24 ONE PLACEMENT—MEDICAL INSTITUTIONS AND OTHER HEALTH RELATED FACILITIES
25 ONE SUPPORTIVE COUNSELING SESSION

HOME DELIVERED/CONGREGATE MEALS

26 ONE PREPARATION AND DELIVERY OF A MEAL—CLIENT'S OWN HOME
27 ONE PREPARATION OF A MEAL—CENTRAL DINING FACILITY
28 ONE ARRANGEMENT—HOME DELIVERED OR CONGREGATE MEALS

HOMEMAKER SERVICE

29 ONE HOUR—HOMEMAKER SERVICE
30 ONE ARRANGEMENT—HOMEMAKER SERVICE

HOME MANAGEMENT/FUNCTIONAL EDUCATION

31 ONE INDIVIDUAL SESSION—INSTRUCTIONAL/TRAINING
32 ONE GROUP SESSION—INSTRUCTIONAL/TRAINING
33 ONE ARRANGEMENT—HOME MANAGEMENT AND OTHER FUNCTIONAL EDUCATIONAL SERVICES

HOUSING IMPROVEMENT

34 ONE ARRANGEMENT—FOR RELOCATION, OWNERSHIP OR HOUSING IMPROVEMENT
35 ONE RELOCATION—RENTAL OR OWNERSHIP
36 ONE HOUSING IMPROVEMENT

PROTECTIVE SERVICES—ADULTS

37 ONE INVESTIGATION WHICH SUBSTANTIATES NEGLECT, ABUSE, OR EXPLOITATION
38 ONE INVESTIGATION WHICH DOES NOT SUBSTANTIATE NEGLECT, ABUSE, OR EXPLOITATION
39 ONE RESOLUTION OF HAZARDOUS LIVING SITUATION OR CONDITION

PROTECTIVE SERVICES—CHILDREN

40 ONE UNSUBSTANTIATED INVESTIGATION
41 ONE INVESTIGATION SUBSTANTIATING ABUSE, NEGLECT, OR EXPLOITATION
42 ONE RESOLUTION—COURT ACTION
43 ONE RESOLUTION—PARENTAL INTERVENTION
44 ONE MONTH OF SUPERVISION

SPECIAL SERVICE—BLIND

45 ONE SESSION (GROUP OR INDIVIDUAL) TRAINING/EDUCATION FOR CLIENT OR CARETAKER
46 ONE AID/APPLIANCE
47 ONE ARRANGEMENT—SPECIALIZED SERVICES OR AIDS FOR BLIND

TRANSPORTATION

48 ONE ONE-WAY TRIP
49 ONE ARRANGEMENT—TRANSPORTATION SERVICES

EXHIBIT 12

SERVICE UNIT SUMMARY SHEET

1. AGENCY NAME ____________________

2. PROJECT COORDINATOR ____________________

4. SERVICE WORKER/ VENDOR AGENCY	WEEKLY SUMMARY	5. CHORE SERVICE		DAY CARE ADULTS		DAY CARE CHILDREN					EDUC SERV	EMPLOYMENT SERVICES		FAMILY PLANNING				FOSTER CARE ADULTS			FOSTER CARE CHILDREN			HEALTH RELATED SERVICES			HOME DELIVERED CONGREGATE			HOMEMAKER SERVICE		HOME MGMT FUNCT ED			HOUSING IMPROVEMENT			ADULT PROTECTIVE SERVICES			PRO SE FOR	
		01	02	03	04	05	06	07	08	09	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41
1.	WEEK 1																																									
	WEEK 2																																									
	WEEK 3																																									
	WEEK 4																																									
	SUBTOTAL																																									
2.	WEEK 1																																									
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	WEEK 3																																									
	WEEK 4																																									
	SUBTOTAL																																									
3.	WEEK 1																																									
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	WEEK 3																																									
	WEEK 4																																									
	SUBTOTAL																																									
4.	WEEK 1																																									
	WEEK 2																																									
	WEEK 3																																									
	WEEK 4																																									
	SUBTOTAL																																									
5.	WEEK 1																																									
	WEEK 2																																									
	WEEK 3																																									
	WEEK 4																																									
	SUBTOTAL																																									
6.	WEEK 1																																									
	WEEK 2																																									
	WEEK 3																																									
	WEEK 4																																									
	SUBTOTAL																																									
6. GRAND TOTAL																																										

EXHIBIT 12

SERVICE UNIT SUMMARY SHEET

__________ 2. PROJECT COORDINATOR ______________________________ 3. PAGE ________ OF ________

5.	CHORE SERVICE		DAY CARE ADULTS		DAY CARE CHILDREN					EDUC SERV	EMPLOYMENT SERVICES		FAMILY PLANNING				FOSTER CARE ADULTS			FOSTER CARE CHILDREN			HEALTH RELATED SERVICES			HOME DELIVERED CONGREGATE			HOMEMAKER SERVICE		HOME MGMT FUNCT ED			HOUSING IMPROVEMENT			ADULT PROTECTIVE SERVICES			PROTECTIVE SERVICES FOR CHILDREN					SPECIAL SERVICES TO BLIND			TRANSPORTATION	
	01	02	03	04	05	06	07	08	09	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49
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EXHIBIT 13

SUMMARY OF SERVICE OUTPUT UNITS REPORTED

Service/ Output units	Unit Totals
CHORE SERVICE	**8**
01 ONE ARRANGEMENT—CHORE SERVICES	4
02 ONE HOUR—CHORE SERVICES	4
DAY CARE—ADULTS	**1**
03 ONE DAY—ANY TYPE OF DAY CARE	1
04 ONE ARRANGEMENT—DAY CARE SERVICES	0
DAY CARE—CHILDREN	**1,979**
05 ONE ARRANGEMENT—ANY TYPE OF CARE	7
06 ONE FULL-TIME DAY—IN-HOME CARE	737
07 *ONE FULL-TIME DAY—CARE OUTSIDE CHILD'S OWN HOME	1,233
08 ONE PART-TIME DAY—IN-HOME CARE	0
09 ONE PART-TIME DAY—CARE OUTSIDE CHILD'S OWN HOME	3
EDUCATIONAL SERVICES	**5**
10 ONE ARRANGEMENT—EDUCATIONAL TRAINING	5
EMPLOYMENT SERVICES	**29**
11 ONE DIAGNOSTIC ASSESSMENT	22
12 ONE ARRANGEMENT—ANY TYPE OF TRAINING, DIAGNOSTIC ASSESSMENT OR JOB PLACEMENT	7
FAMILY PLANNING	**65**
13 ONE MEDICAL CONTRACEPTIVE SERVICE—SUPPLY OR PROCEDURE	19
14 ONE ARRANGEMENT—SOCIAL, EDUCATIONAL OF MEDICAL SERVICES FOR FAMILY PLANNING	24
15 ONE INDIVIDUAL SESSION—EDUCATION, SOCIAL, INFORMATION	17
16 ONE GROUP SESSION—EDUCATION, SOCIAL, INFORMATION	5
FOSTER CARE—ADULTS	**4**
17 ONE PLACEMENT—FOSTER CARE HOME	2
18 ONE MONTH OF SUPERVISION	0
19 ONE ARRANGEMENT FOR FOSTER CARE	2
FOSTER CARE—CHILDREN	**51**
20 ONE CHILD RETURNED TO OWN HOME OR OTHER PERMANENT LIVING ARRANGEMENT	11
21 ONE PLACEMENT—FOSTER CARE HOME OR GROUP CARE FACILITY	8
22 ONE MONTH OF SUPERVISION	32
HEALTH-RELATED SERVICES	**594**
23 ONE ARRANGEMENT—TO SECURE NEEDED HEALTH SERVICES (INCLUDES ADMISSIONS)	286
24 ONE PLACEMENT—MEDICAL INSTITUTIONS AND OTHER HEALTH RELATED FACILITIES	14
25 ONE SUPPORTIVE COUNSELING SESSION	294

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* 53% Provided by vendor agency.

Service/ Output units	Unit Totals
HOME DELIVERED/CONGREGATE MEALS	**33**
26 ONE PREPARATION AND DELIVERY OF A MEAL—CLIENT'S OWN HOME	0
27 ONE PREPARATION OF A MEAL—CENTRAL DINING FACILITY	0
28 ONE ARRANGEMENT—HOME DELIVERED OR CONGREGATE MEALS	33
HOMEMAKER SERVICE	**1**
29 ONE HOUR—HOMEMAKER SERVICE	0
30 ONE ARRANGEMENT—HOMEMAKER SERVICE	1
HOME MANAGEMENT/FUNCTIONAL EDUCATION	**169**
31 ONE INDIVIDUAL SESSION—INSTRUCTIONAL/TRAINING	109
32 ONE GROUP SESSION—INSTRUCTIONAL/TRAINING	21
33 ONE ARRANGEMENT—HOME MANAGEMENT AND OTHER FUNCTIONAL EDUCATIONAL SERVICES	39
HOUSING IMPROVEMENT	**23**
34 ONE ARRANGEMENT—FOR RELOCATION, OWNERSHIP OR HOUSING IMPROVEMENT	16
35 ONE RELOCATION—RENTAL OR OWNERSHIP	1
36 ONE HOUSING IMPROVEMENT	6
PROTECTIVE SERVICES—ADULTS	**16**
37 ONE INVESTIGATION WHICH SUBSTANTIATES NEGLECT, ABUSE, OR EXPLOITATION	5
38 ONE INVESTIGATION WHICH DOES NOT SUBSTANTIATE NEGLECT, ABUSE, OR EXPLOITATION	2
39 ONE RESOLUTION OF HAZARDOUS LIVING SITUATION OR CONDITION	9
PROTECTIVE SERVICES—CHILDREN	**204**
40 ONE UNSUBSTANTIATED INVESTIGATION	27
41 ONE INVESTIGATION SUBSTANTIATING ABUSE, NEGLECT, OR EXPLOITATION	27
42 ONE RESOLUTION—COURT ACTION	6
43 ONE RESOLUTION—PARENTAL INTERVENTION	4
44 ONE MONTH OF SUPERVISION	140
SPECIAL SERVICES—BLIND	**11**
45 ONE SESSION (GROUP OR INDIVIDUAL) TRAINING/EDUCATION FOR CLIENT OR CARETAKER	1
46 ONE AID/APPLIANCE	3
47 ONE ARRANGEMENT—SPECIALIZED SERVICES OR AIDS FOR BLIND	7
TRANSPORTATION	**350**
48 *ONE ONE-WAY TRIP	322
49 ONE ARRANGEMENT—TRANSPORTATION SERVICES	28

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* 61% Provided by vendor agency.

EXHIBIT 14

SERVICE	RECOMMENDED OUTPUT UNITS
1. Chore Services	.01 One arrangement—chore services
	.02 One hour—chore services
2. Day Care Services for Adults	.03 One day—any type of day care
	.04 One arrangement—day care services
3. Day Care Services for Children	.05 One arrangement—any type of care
	.06 One full-time day—in-home care
	.07 One full-time day—care outside child's own home
	.08 One part-time day—in-home care
	.09 One part-time day—care outside child's own home
4. Educational Services	.10 One arrangement—educational service
5. Employment Services	.11 One diagnostic assessment
	.12 One arrangement—any type of training, diagnostic ass placement
6. Family Planning	.13 One medical contraceptive service—supply or procedur
	.14 One arrangement—social, educational or medical serv planning
	.15 One individual session—education, social, information
	.16 One group session—education, social, information
7. Foster Care for Adults	.17 One placement—foster care home
	.18 One month of supervision
	.19 One arrangement for foster care

EXHIBIT 14

SERVICE		RECOMMENDED OUTPUT UNITS
	.01	One arrangement—chore services
	.02	One hour—chore services
es for Adults	.03	One day—any type of day care
	.04	One arrangement—day care services
es for Children	.05	One arrangement—any type of care
	.06	One full-time day—in-home care
	.07	One full-time day—care outside child's own home
	.08	One part-time day—in-home care
	.09	One part-time day—care outside child's own home
vices	.10	One arrangement—educational service
rvices	.11	One diagnostic assessment
	.12	One arrangement—any type of training, diagnostic assessment or job placement
	.13	One medical contraceptive service—supply or procedure
	.14	One arrangement—social, educational or medical services for family planning
	.15	One individual session—education, social, information
	.16	One group session—education, social, information
Adults	.17	One placement—foster care home
	.18	One month of supervision
	.19	One arrangement for foster care

EXHIBIT 14 (Cont'd.)

SERVICE	RECOMMENDED OUTPUT UNITS
8. Foster Care Services for Children	.20 One child returned to own home or other permanent living a
	.21 One placement—foster care home or group care facility
	.22 [1]One month of supervision
9. Health Related Services (Physical and Mental Health)	.23 One arrangement—to secure needed health services (includes admissions)
	.24 One placement—medical institutions and other health relat
	.25 One supportive counseling session
10. Home Delivered or Congregate Meals	.26 One preparation and delivery of a meal—client's own home
	.27 One preparation of a meal—central dining facility
	.28 One arrangement—home delivered or congregate meals
11. Homemaker Service	.29 One hour—homemaker service
	.30 One arrangement—homemaker service
12. Home Management and Other Functional Educational Services	.31 One individual session—instructional/training
	.32 One group session—instructional/training
	.33 One arrangement—home management and other functional educational services
13. Housing Improvement	.34 One arrangement—for relocation, ownership or housing imp
	.35 One relocation—rental or ownership
	.36 [2]One housing improvement

---

[1] Includes work with natural parents, foster parents, and child.

[2] Includes identifying substandard housing, improving landlord tenant relations, preventing evictions or directly assis obtain housing improvements.

EXHIBIT 14 (Cont'd.)

ERVICE		RECOMMENDED OUTPUT UNITS
ces for Children	.20	One child returned to own home or other permanent living arrangement
	.21	One placement—foster care home or group care facility
	.22	[1]One month of supervision
rvices lental Health)	.23	One arrangement—to secure needed health services (includes admissions)
	.24	One placement—medical institutions and other health related facilities
	.25	One supportive counseling session
r Congregate Meals	.26	One preparation and delivery of a meal—client's own home
	.27	One preparation of a meal—central dining facility
	.28	One arrangement—home delivered or congregate meals
ce	.29	One hour—homemaker service
	.30	One arrangement—homemaker service
nt and Other Functional rvices	.31	One individual session—instructional/training
	.32	One group session—instructional/training
	.33	One arrangement—home management and other functional educational services
nent	.34	One arrangement—for relocation, ownership or housing improvement
	.35	One relocation—rental or ownership
	.36	[2]One housing improvement

ural parents, foster parents, and child.

bstandard housing, improving landlord tenant relations, preventing evictions or directly assisting client to ments.

EXHIBIT 14 (Cont'd.)

SERVICE		RECOMMENDED OUTPUT UNITS
14. Protective Services for Adults	.37	One investigation which substantiates neglect, abuse, or
	.38	One investigation which does not substantiate neglect, a exploitation
	.39	One resolution of hazardous living situation or condition
15. Protective Services for Children	.40	One unsubstantiated investigation
	.41	One investigation substantiating abuse, neglect, or explo
	.42	[3]One resolution—court action
	.43	[3]One resolution—parental intervention
	.44	One month of supervision
16. Special Services for the Blind	.45	One session (group or individual) training/education for caretaker
	.46	One aid/appliance
	.47	One arrangement—specialized services or aids for blind
17. Transportation	.48	[4]One one-way trip
	.49	One arrangement—transportation services

[3] Resolution—amelioration of situation of abuse, neglect, or exploitation.

EXHIBIT 14 (Cont'd.)

SERVICE		RECOMMENDED OUTPUT UNITS
ces for Adults	.37	One investigation which substantiates neglect, abuse, or exploitation
	.38	One investigation which does not substantiate neglect, abuse, or exploitation
	.39	One resolution of hazardous living situation or condition
ces for Children	.40	One unsubstantiated investigation
	.41	One investigation substantiating abuse, neglect, or exploitation
	.42	[3]One resolution—court action
	.43	[3]One resolution—parental intervention
	.44	One month of supervision
for the Blind	.45	One session (group or individual) training/education for client or caretaker
	.46	One aid/appliance
	.47	One arrangement—specialized services or aids for blind
	.48	[4]One one-way trip
	.49	One arrangement—transportation services

ion of situation of abuse, neglect, or exploitation.

Services program in the County, under the supervision of the State of California Department of Health.

Initial development of the SSIS was financed by an appropriation out of a special State discretionary fund and cost approximately $113,000. Additions and modifications to date have increased the total to about $250,000.

SYSTEM DEVELOPMENT HISTORY

In 1971, the State of California contracted to develop a social service information system which was to become the "model" for other counties in the state.

Los Angeles County was selected to participate with the state and the contractor in the design and testing of the system. As has been the case in many subsequent experiments, the large metropolitan area proved to be less than desirable as an initial test site.

As the L.A. location for the project began to falter, the State and the contractor decided that the project should be shifted to another county. San Joaquin, a medium-sized county close to the state capitol, volunteered to be the test site. This proved to be a positive step both for the project designers and sponsors and for the county social services management, who were at the "ready" stage for implementing an information system.

Prior to the development of the new system, the social service workers had used narrative accounts to describe what they did, their clients' problems and services received, and what happened to the client as a result of providing these services. Each narrative was different, used different terminology and was much too cumbersome for use by management, especially in trying to decide program emphasis, or in case load planning.

A part of the original system design proposed for San Joaquin called for the reporting of time spent by workers in delivering a service. The departmental management retained this feature because they felt such data would improve management techniques by providing a better picture of what happens in the delivery of social services.

UNIT DEVELOPMENT PROCESS

Work in San Joaquin began in May, 1973. It featured a "time" unit defined as one hour of service received by the client. This is a more simplified measurement than some of those found in current experimental projects, but it was rather unique at the time this project was initiated.

There were then no known States or counties using what we now call social service units, although some states were recording hours of services spent by workers and the Booz-Allen research effort described elsewhere in this section was underway. In addition, little or no literature was available on the subject. The social service director had, however, had experience with units in the health services field which enabled him to provide some guidance.

Testing of the proposed system design, which had already been well underway in Los Angeles, began shortly after the project was moved to San Joaquin. Workers selected as participants were those with generalized case loads not limited to a specialized services area. In this way the design concept could be assessed with the widest possible sample of services and range of situations.

SYSTEM OVERVIEW

The SSIS Service Plan opens the case for the client (Exhibit 15). The Service Plan includes client identifying data, demographic data, current client goal, planned goal and review date for the plan. A case number is usually assigned for a family with each member being assigned a "person number." Originally the form included space for recording of barriers (needs or problems) and planned services. But since most cases turned out to be "one-service" cases, this seemed to be a wasted step.

If the service is purchased from a private agency, a service authorization is made to the provider agency specifying the type of service and number of hours per month to be provided. For services delivered directly by the county agency, a Service Delivery Form (Exhibit 16) is filled out with numbers of hours and minutes of service received by the client. For services delivered at the same time to more than one person in a family, the worker can enter the family's case number and then the person number for each family member receiving the same service. If persons with different case numbers simultaneously receive the same services, a separate form is filled out for each person.

In addition to services and hours of service received, the barrier code (or need code) toward which the service is applied is entered for each service and the barrier status (identified, removed or not removed) indicated. If the service worker has expended travel time in delivering the service, that time is recorded in hour and minutes.

The original system also included a form for the worker to record non-client-inter-active time in hours, but that is not recorded in the computer file.

Reports in addition to those required by HEW/SSRR are produced monthly, quarterly and yearly showing total number of hours of service provided by organizational division, by types of services, by goal and by barrier. (See Appendix B.)

The system of reporting hours of service has not been formally extended to include the private providers from whom the county purchases services. However, there are negotiations in progress to have them report just like direct workers and one agency already has initiated this procedure.

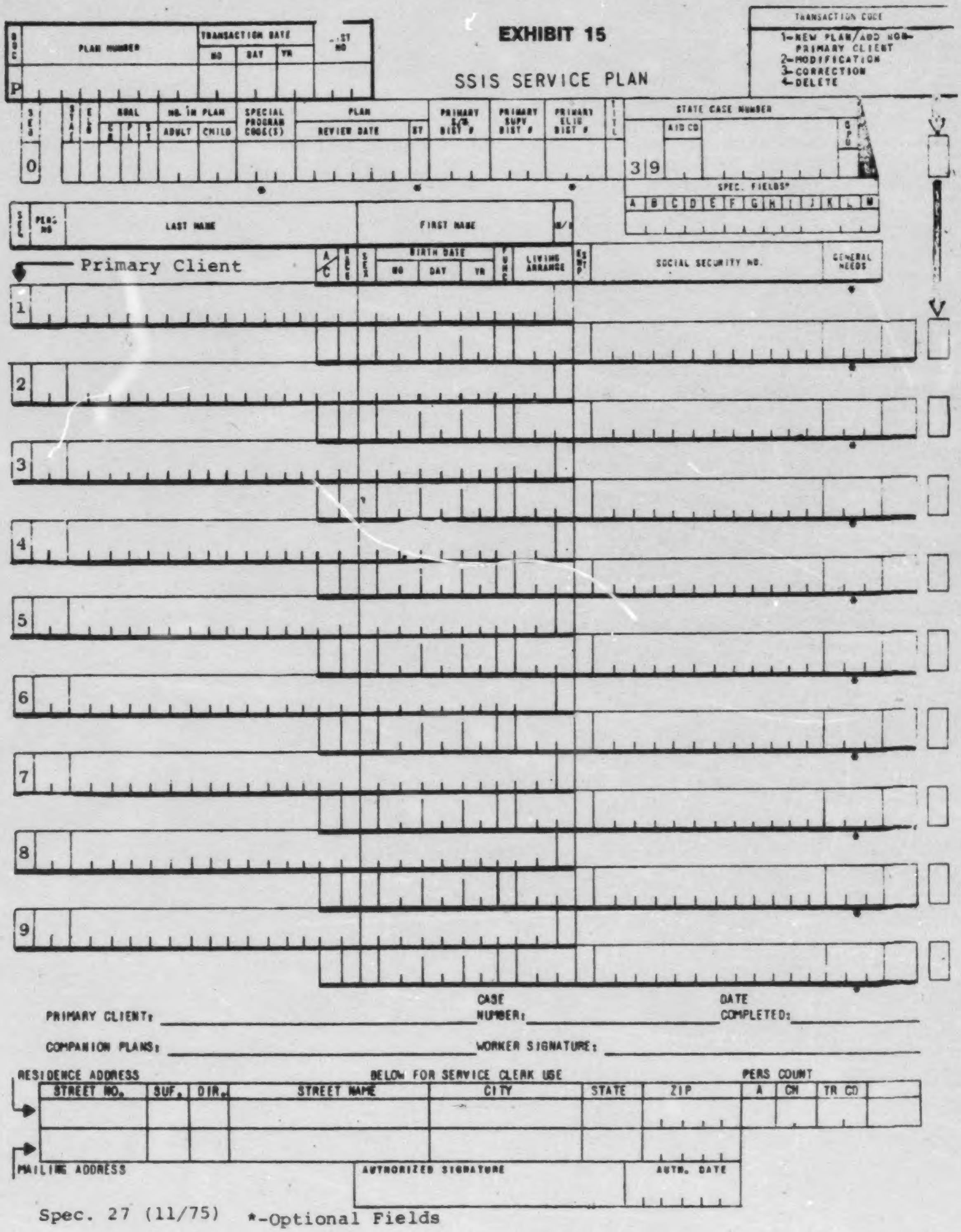
FUTURE OF THE PROJECT

Although San Joaquin has not yet developed cost per unit data, such information will be a part of the projected State effort for determining SSRR costs. Total worker time for 12 days out of the month will be sampled to arrive at a percentage base for allocating dollars by service. The next step would be to determine the cost per person associated with each service.

This system may be adopted by other county agencies, states, and the local mental health agency since the county has received numerous requests for information about it.

EXHIBIT 15

SSIS SERVICE PLAN



SOC | PLAN NUMBER | TRANSACTION DATE MO DAY YR | LIST NO
P

TRANSACTION CODE
1—NEW PLAN/ADD NON-PRIMARY CLIENT
2—MODIFICATION
3—CORRECTION
4—DELETE

SEQ | STAT | ELG | GOAL | NO. IN PLAN ADULT CHILD | SPECIAL PROGRAM CODE(S) | PLAN REVIEW DATE | ST | PRIMARY S/S DIST # | PRIMARY SUPV DIST # | PRIMARY ELIG DIST # | TITL | STATE CASE NUMBER AID CD
0 | 3 9

SPEC. FIELDS*
A B C D E F G H I J K L M

SEQ | PERS NO | LAST NAME | FIRST NAME | M/I

Primary Client | A/C | RACE | SEX | BIRTH DATE MO DAY YR | FUNC | LIVING ARRANGE | EXMPT | SOCIAL SECURITY NO. | GENERAL NEEDS

1
2
3
4
5
6
7
8
9

PRIMARY CLIENT: CASE NUMBER: DATE COMPLETED:

COMPANION PLANS: WORKER SIGNATURE:

RESIDENCE ADDRESS BELOW FOR SERVICE CLERK USE PERS COUNT

STREET NO. | SUF. | DIR. | STREET NAME | CITY | STATE | ZIP | A | CH | TR CD

MAILING ADDRESS AUTHORIZED SIGNATURE AUTH. DATE

Spec. 27 (11/75) *-Optional Fields

EXHIBIT 15--Continued
*** (USE WHITE COPY ONLY) ***

REVIEW AND CERTIFICATION OF ELIGIBILITY TO RECEIVE SERVICES

1. The person identified on reverse is hereby certified as eligible to receive social services effective ______________________ as checked below:
DATE OF APPLICATION/PLAN

METHOD OF VERIFICATION

☐ Welfare Master File
☐ SDX -- Title XVI
☐ Other ______________

STATE NO. ______________

2. ☐ SSI/SSP Recipients
☐ AFDC Recipients

☐ Income Eligible - Total ☐ Yearly Income $________
Total ☐ Monthly Income $________

FAMILY SIZE

3. ______________ is ineligible to receive social services
NAME
because ______________________________
______________________________.

4. SIGNATURE	TITLE	DATE

SSIS SERVICE PLAN NARRATIVE

PLAN NARRATIVE: ______________________________

EXHIBIT 16

SSIS SERVICE DELIVERY

DOC	PLAN NUMBER	DELIVERY DATE	DIST NO
S			

SEQ	PERSON NUMBER	SERVICE CODE	BARRIER		STATUS		GROUP SESSION			NEW LIVING ARRANG	TIME TOTALS			NO DELIV	DFA 48	
			CODE	ST	GL	PL	# IN GROUP	# RPTD	# S/W		CLIENT	TRAVEL	TOTAL			A
A											:	:	:			
B											:	:	:			
C											:	:	:			
D											:	:	:			
				*	*	*	*	*	*	*						

COMMENTS:

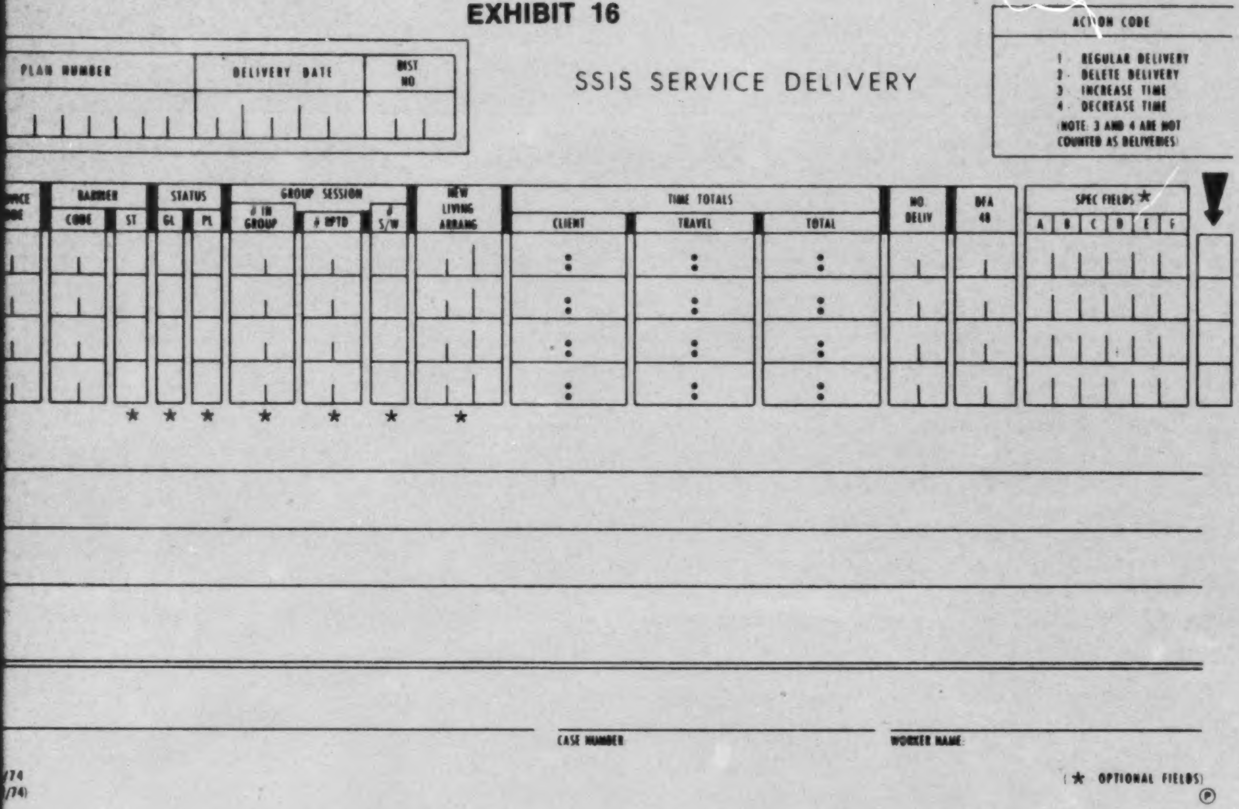
CLIENT NAME:

CASE NUMBER:

WORKER NAME:

REV: 11/18/74
SPEC. 27A (12/74)

EXHIBIT 16



PLAN NUMBER	DELIVERY DATE	DIST NO

SSIS SERVICE DELIVERY

ACTION CODE

1 - REGULAR DELIVERY
2 - DELETE DELIVERY
3 - INCREASE TIME
4 - DECREASE TIME
(NOTE: 3 AND 4 ARE NOT COUNTED AS DELIVERIES)

VICE DE	BARRIER		STATUS		GROUP SESSION			NEW LIVING ARRANG	TIME TOTALS			NO. DELIV	DFA 48	SPEC FIELDS ★						▼
	CODE	ST	GL	PL	# IN GROUP	# MPTD	# S/W		CLIENT	TRAVEL	TOTAL			A	B	C	D	E	F	
									:	:	:									
									:	:	:									
									:	:	:									
									:	:	:									
		★	★	★	★	★	★	★												

CASE NUMBER

WORKER NAME

/74
/74)

(★ OPTIONAL FIELDS)

PROS AND CONS OF THE SAN JOAQUIN SYSTEM

Pros

- The project's reports have proved invaluable to various levels of management.
- Unit data has been revised. Previous assumptions about peak times for certain services has allowed better planning to meet seasonal trends.
- Reports on units delivered provide accurate and timely information for analyzing the needs of the current "service population" as required by Title XX.
- The unit data is also used as evidence in budget hearings, specifically when dollar shifts among services are projected.

The information system as a whole has enhanced communications between workers and clients, among workers, between workers and supervisors, and between levels of supervision. The old narrative forms of recording service activity could never have done this, since words have different meanings to different people and reading lengthy narratives is too time consuming. Expected worker resistance to the new system failed to materialize and no one wishes to return to the old ways.

Workers can now easily look at a client's record, see what services he received and the level or volume or the service required without depending on interpretation from the worker who originally delivered the services.

Cons

- There is no cost allocation feature in the present system so actual unit costs cannot be determined.
- Reports aimed only at time with client may threaten the case worker. The balance of case worker time should be accounted for on the computer reports.
- The computer reports are difficult to read, contain too much information on one page and are poorly formatted.

STATE OF UTAH, DEPARTMENT OF SOCIAL SERVICES SOCIAL SERVICES INFORMATION SYSTEM

The Department of Social Services in Utah has one of the country's most advanced information systems for social services featuring a rather unique unit of service approach. The "Utah unit" has been developed differently for those services that are provided directly by case workers in the State Department of Social Services and for services that are purchased from private agencies.

DIRECT DELIVERED SERVICES

The direct delivery service unit is based upon *time*—the time a case worker spends in working with, or on behalf of a client (called a 'consumer' in the Utah system). The unit is measured in one-half hour increments, and while this is not in itself unusual, the multiple uses of the time unit both by the case worker and the departmental managers is unique in social services systems. The Utah unit is used to:

- Budget case worker time
- Schedule clients
- Estimate caseloads
- Estimate costs
- Negotiate with provider agencies

and for many other related purposes.

The unit system might be called the '683' system, since 683 is the number of one-half hours each full-time case worker is expected to spend on client-related work during a three month period or quarter. The 683 was derived by first figuring the total one-half hours available during the quarter: 73 hours a month x 3 months x 2 (½ hour) = 1038. The quarter is called an "episode" in Utah. All consumer-related activities are scheduled and consumer objectives stated for each 3 month period. Program objectives are reviewed with the consumer and services are planned quarterly.

Testing for the amount of time that could be budgeted or 'loaded' for consumer-related work determined that an amount slightly less than ⅔ of the case workers time, i.e., 683 one-half hours was a good target figure for quarterly operations. An expected average number of units per service per quarter has also been determined and catalogued in a Service Inventory (see Appendix C).

The sequence of events for using the 683 units is as follows: A consumer first sees a Master Service Unit worker whose job it is to fill out the Consumer Information Sheet (see Exhibit 17). This form, in addition to basic demographic and family information, contains the goal and program objective for the service. The program objective is similar to the "Product Unit" in the New York system.

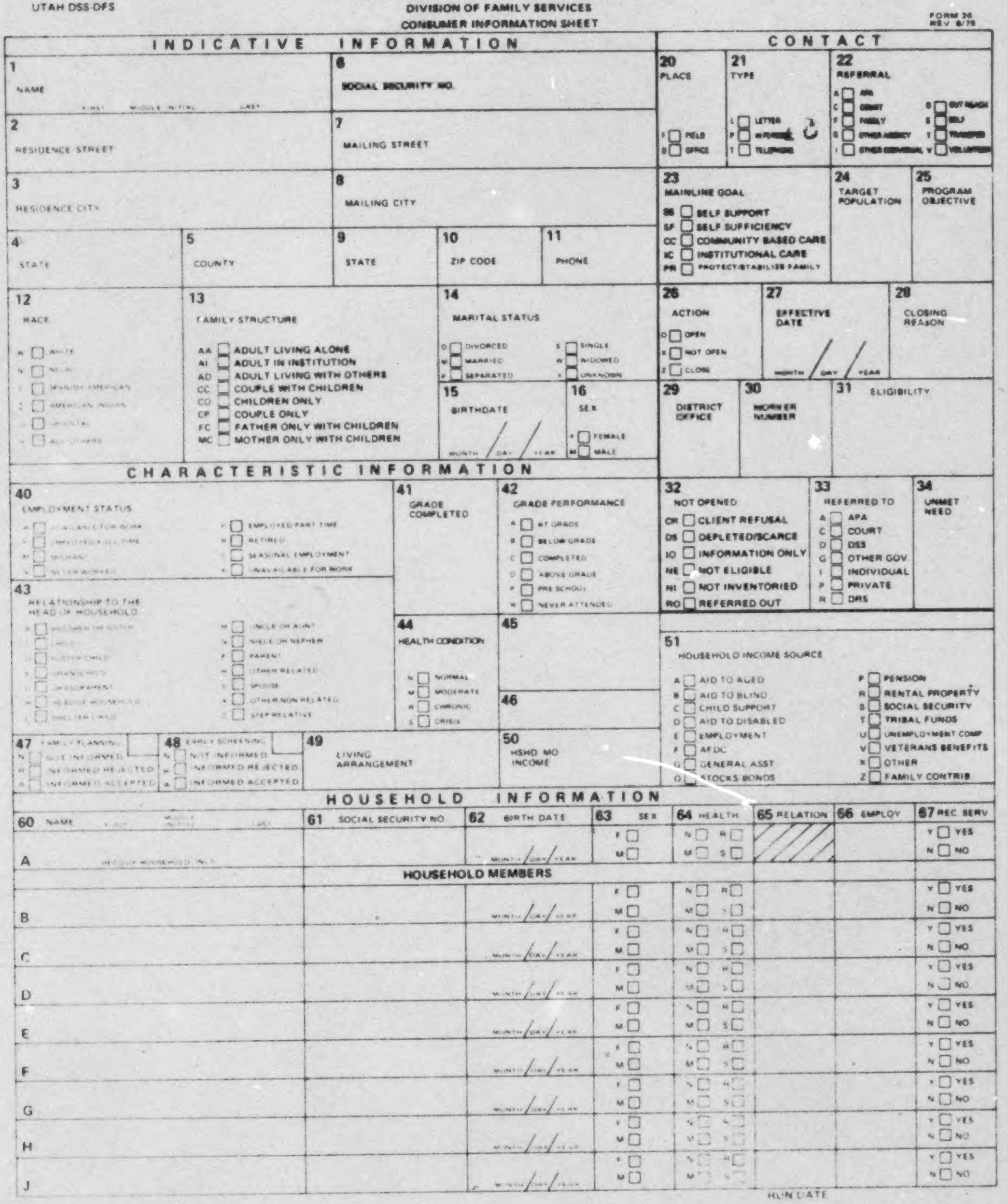
A second form, the Social Service Plan sheet (Exhibit 18) is partially filled out with the Service needed, the worker to be assigned, the service delivery responsibilities and the estimated number of units from the Services Inventory (this form is also used for Purchase of Service and will be described below).

At this point, the infomation from both forms is entered into the automated system by remote terminal in the urban areas, and by batch method from the rural areas. (90% of the Utah case load is in the 80-mile corridor in the Western part of the State from Provo to Ogden.) Each case worker receives a monthly report on his cases and the number of units scheduled.

The responsible case worker uses the Social Services Plan sheet to update the clients' computer file either quarterly or as the services are rendered. Various reports are produced to compare the units of service rendered with those scheduled and to determine the availability and efficiency of particular case workers. Exhibit 19 is one of these, showing units rendered by target population by district.

The 683 one-half hours is reviewed periodically by both case workers and supervisors to assure that it is a reasonable number for use as a tool in planning and managing the delivery of services

EXHIBIT 17



UTAH DSS-DFS

UTAH DEPARTMENT OF SOCIAL SERVICES
DIVISION OF FAMILY SERVICES
CONSUMER INFORMATION SHEET

FORM 26
REV 8/75

INDICATIVE INFORMATION

1 NAME (FIRST, MIDDLE INITIAL, LAST)
2 RESIDENCE STREET
3 RESIDENCE CITY
4 STATE
5 COUNTY
6 SOCIAL SECURITY NO.
7 MAILING STREET
8 MAILING CITY
9 STATE
10 ZIP CODE
11 PHONE

12 RACE
W ☐ WHITE
N ☐ NEGRO
S ☐ SPANISH AMERICAN
I ☐ AMERICAN INDIAN
O ☐ ORIENTAL
X ☐ ALL OTHERS

13 FAMILY STRUCTURE
AA ☐ ADULT LIVING ALONE
AI ☐ ADULT IN INSTITUTION
AD ☐ ADULT LIVING WITH OTHERS
CC ☐ COUPLE WITH CHILDREN
CO ☐ CHILDREN ONLY
CP ☐ COUPLE ONLY
FC ☐ FATHER ONLY WITH CHILDREN
MC ☐ MOTHER ONLY WITH CHILDREN

14 MARITAL STATUS
D ☐ DIVORCED
M ☐ MARRIED
P ☐ SEPARATED
S ☐ SINGLE
W ☐ WIDOWED
X ☐ UNKNOWN

15 BIRTHDATE MONTH / DAY / YEAR

16 SEX
F ☐ FEMALE
M ☐ MALE

CONTACT

20 PLACE
F ☐ FIELD
O ☐ OFFICE

21 TYPE
L ☐ LETTER
P ☐ IN PERSON
T ☐ TELEPHONE

22 REFERRAL
A ☐ APA
C ☐ COURT
F ☐ FAMILY
G ☐ OTHER AGENCY
I ☐ OTHER INDIVIDUAL
O ☐ OUT REACH
S ☐ SELF
T ☐ TRANSFER
V ☐ VOLUNTEER

23 MAINLINE GOAL
SS ☐ SELF SUPPORT
SF ☐ SELF SUFFICIENCY
CC ☐ COMMUNITY BASED CARE
IC ☐ INSTITUTIONAL CARE
PR ☐ PROTECT/STABILIZE FAMILY

24 TARGET POPULATION
25 PROGRAM OBJECTIVE

26 ACTION
O ☐ OPEN
X ☐ NOT OPEN
Z ☐ CLOSE

27 EFFECTIVE DATE MONTH / DAY / YEAR
28 CLOSING REASON
29 DISTRICT OFFICE
30 WORKER NUMBER
31 ELIGIBILITY

32 NOT OPENED
CR ☐ CLIENT REFUSAL
DS ☐ DEPLETED/SCARCE
IO ☐ INFORMATION ONLY
NE ☐ NOT ELIGIBLE
NI ☐ NOT INVENTORIED
RO ☐ REFERRED OUT

33 REFERRED TO
A ☐ APA
C ☐ COURT
D ☐ DSS
G ☐ OTHER GOV
I ☐ INDIVIDUAL
P ☐ PRIVATE
R ☐ DRS

34 UNMET NEED

CHARACTERISTIC INFORMATION

40 EMPLOYMENT STATUS
A ☐ AVAILABLE FOR WORK
F ☐ EMPLOYED FULL TIME
M ☐ MIGRANT
N ☐ NEVER WORKED
P ☐ EMPLOYED PART TIME
R ☐ RETIRED
S ☐ SEASONAL EMPLOYMENT
U ☐ UNAVAILABLE FOR WORK

41 GRADE COMPLETED

42 GRADE PERFORMANCE
A ☐ AT GRADE
B ☐ BELOW GRADE
C ☐ COMPLETED
D ☐ ABOVE GRADE
P ☐ PRE SCHOOL
N ☐ NEVER ATTENDED

43 RELATIONSHIP TO THE HEAD OF HOUSEHOLD
B ☐ BROTHER OR SISTER
C ☐ CHILD
F ☐ FOSTER CHILD
G ☐ GRANDCHILD
Q ☐ GRANDPARENT
H ☐ HEAD OF HOUSEHOLD
L ☐ SHELTER CHILD
M ☐ UNCLE OR AUNT
N ☐ NIECE OR NEPHEW
P ☐ PARENT
R ☐ OTHER RELATED
S ☐ SPOUSE
X ☐ OTHER NON RELATED
Z ☐ STEP RELATIVE

44 HEALTH CONDITION
N ☐ NORMAL
M ☐ MODERATE
R ☐ CHRONIC
S ☐ CRISIS

45

46

47 FAMILY PLANNING ☐
N ☐ NOT INFORMED
R ☐ INFORMED REJECTED
A ☐ INFORMED ACCEPTED

48 EARLY SCREENING ☐
N ☐ NOT INFORMED
R ☐ INFORMED REJECTED
A ☐ INFORMED ACCEPTED

49 LIVING ARRANGEMENT

50 HSHD MO INCOME

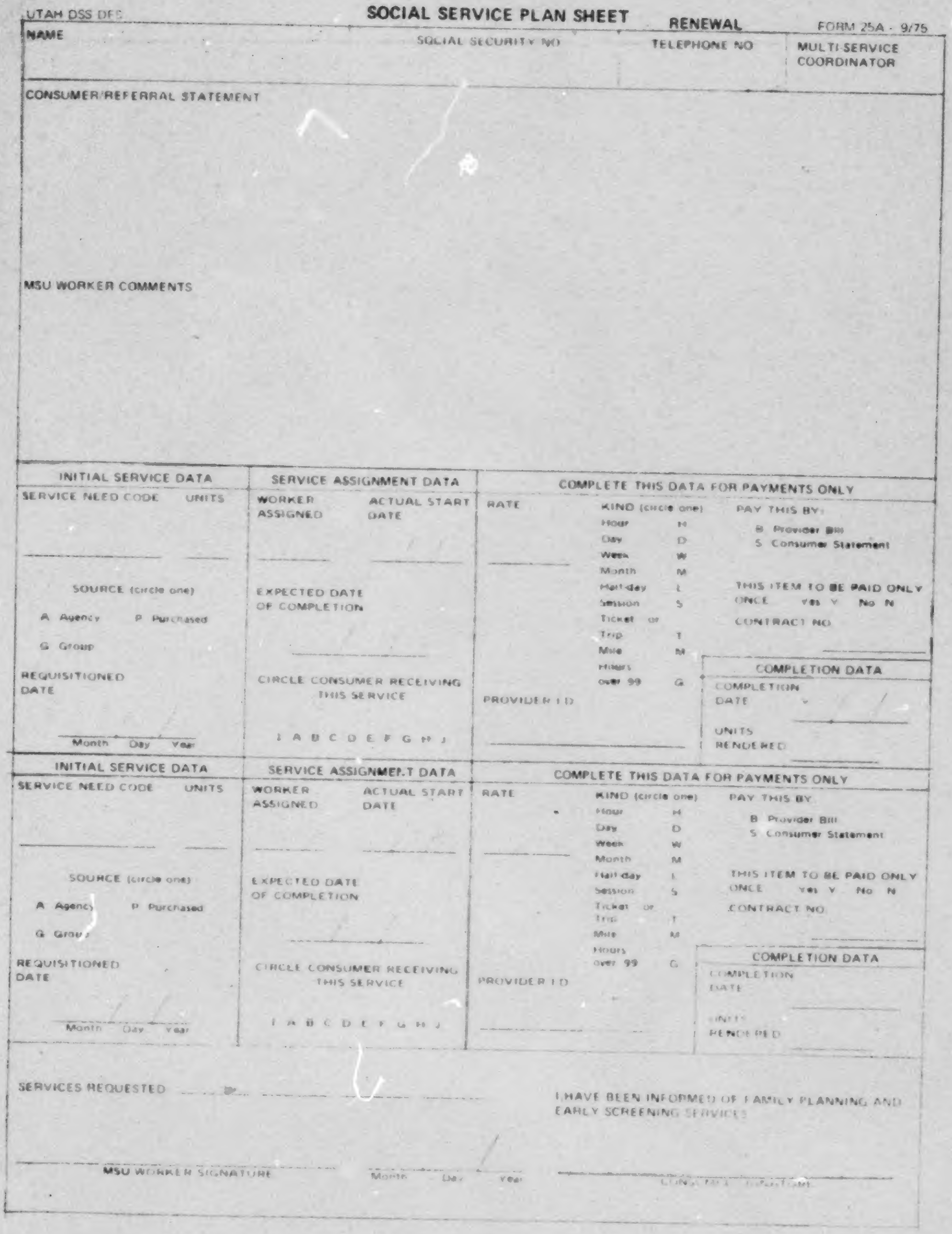
51 HOUSEHOLD INCOME SOURCE
A ☐ AID TO AGED
B ☐ AID TO BLIND
C ☐ CHILD SUPPORT
D ☐ AID TO DISABLED
E ☐ EMPLOYMENT
F ☐ AFDC
G ☐ GENERAL ASST
O ☐ STOCKS BONDS
P ☐ PENSION
R ☐ RENTAL PROPERTY
S ☐ SOCIAL SECURITY
T ☐ TRIBAL FUNDS
U ☐ UNEMPLOYMENT COMP
V ☐ VETERANS BENEFITS
X ☐ OTHER
Z ☐ FAMILY CONTRIB

HOUSEHOLD INFORMATION

60 NAME (FIRST, MIDDLE INITIAL, LAST)	61 SOCIAL SECURITY NO	62 BIRTH DATE	63 SEX	64 HEALTH	65 RELATION	66 EMPLOY	67 REC SERV
A HEAD OF HOUSEHOLD ONLY		MONTH / DAY / YEAR	F ☐ M ☐	N ☐ R ☐ M ☐ S ☐	▨		Y ☐ YES N ☐ NO
	HOUSEHOLD MEMBERS						
B		MONTH / DAY / YEAR	F ☐ M ☐	N ☐ R ☐ M ☐ S ☐			Y ☐ YES N ☐ NO
C		MONTH / DAY / YEAR	F ☐ M ☐	N ☐ R ☐ M ☐ S ☐			Y ☐ YES N ☐ NO
D		MONTH / DAY / YEAR	F ☐ M ☐	N ☐ R ☐ M ☐ S ☐			Y ☐ YES N ☐ NO
E		MONTH / DAY / YEAR	F ☐ M ☐	N ☐ R ☐ M ☐ S ☐			Y ☐ YES N ☐ NO
F		MONTH / DAY / YEAR	F ☐ M ☐	N ☐ R ☐ M ☐ S ☐			Y ☐ YES N ☐ NO
G		MONTH / DAY / YEAR	F ☐ M ☐	N ☐ R ☐ M ☐ S ☐			Y ☐ YES N ☐ NO
H		MONTH / DAY / YEAR	F ☐ M ☐	N ☐ R ☐ M ☐ S ☐			Y ☐ YES N ☐ NO
J		MONTH / DAY / YEAR	F ☐ M ☐	N ☐ R ☐ M ☐ S ☐			Y ☐ YES N ☐ NO

RUN DATE

EXHIBIT 18



UTAH DSS DFS

SOCIAL SERVICE PLAN SHEET

RENEWAL

FORM 25A - 9/75

NAME

SOCIAL SECURITY NO

TELEPHONE NO

MULTI-SERVICE COORDINATOR

CONSUMER/REFERRAL STATEMENT

MSU WORKER COMMENTS

INITIAL SERVICE DATA

SERVICE NEED CODE

UNITS

SOURCE (circle one)

A Agency

P Purchased

G Group

REQUISITIONED DATE

Month Day Year

SERVICE ASSIGNMENT DATA

WORKER ASSIGNED

ACTUAL START DATE

EXPECTED DATE OF COMPLETION

CIRCLE CONSUMER RECEIVING THIS SERVICE

I A B C D E F G H J

COMPLETE THIS DATA FOR PAYMENTS ONLY

RATE

PROVIDER I D

KIND (circle one)	
Hour	H
Day	D
Week	W
Month	M
Half-day	L
Session	S
Ticket or Trip	T
Mile	M
Hours over 99	G

PAY THIS BY:

B Provider Bill

S Consumer Statement

THIS ITEM TO BE PAID ONLY ONCE Yes Y No N

CONTRACT NO

COMPLETION DATA

COMPLETION DATE

UNITS RENDERED

INITIAL SERVICE DATA

SERVICE NEED CODE

UNITS

SOURCE (circle one)

A Agency

P Purchased

G Group

REQUISITIONED DATE

Month Day Year

SERVICE ASSIGNMENT DATA

WORKER ASSIGNED

ACTUAL START DATE

EXPECTED DATE OF COMPLETION

CIRCLE CONSUMER RECEIVING THIS SERVICE

I A B C D E F G H J

COMPLETE THIS DATA FOR PAYMENTS ONLY

RATE

PROVIDER I D

KIND (circle one)	
Hour	H
Day	D
Week	W
Month	M
Half-day	L
Session	S
Ticket or Trip	T
Mile	M
Hours over 99	G

PAY THIS BY

B Provider Bill

S Consumer Statement

THIS ITEM TO BE PAID ONLY ONCE Yes Y No N

CONTRACT NO

COMPLETION DATA

COMPLETION DATE

UNITS RENDERED

SERVICES REQUESTED

I HAVE BEEN INFORMED OF FAMILY PLANNING AND EARLY SCREENING SERVICES

MSU WORKER SIGNATURE

Month Day Year

CONSUMER SIGNATURE

EXHIBIT 19

UNITS RENDERED BY TARGET POPULATION BY DISTRICT

NOVEMBER 1975

Source: SSDS Report 401

	DISTRICT								
TARGET POPULATION	**1**	**2A**	**2B**	**3**	**4**	**5**	**6**	**7A**	**7B**
Abused Child	15	120	166	32	14	—	84	—	—
Adoption	75	212	482	65	34	—	—	12	—
Alcoholism	—	12	253	35	—	—	—	12	—
Day Care	44	655	139	57	6	256	51	—	—
Developmentally Disabled	—	—	6	—	—	—	—	—	—
Emotionally Handicapped	—	17	53	31	--	—	82	23	34
Elderly	11	159	217	89	210	22	40	49	75
Foster Care	245	1061	6322	776	305	819	652	266	529
Family Dysfunctioning	102	286	1478	106	119	187	132	117	50
Family Planning	—	—	307	—	—	—	—	6	—
Medically Needy	13	101	95	11	23	—	—	32	15
Mental Retardation	152	572	339	307	82	52	75	27	16
Maladoptive Youth	8	328	16	18	—	—	—	23	—
Neglect	—	—	114	—	—	—	—	—	—
Neglected Child	53	489	2114	163	37	20	485	27	32
Public Assistance	10	28	70	31	3	10	98	—	6
Physically Handicapped	31	179	1164	77	89	72	71	18	6
Protection (AFDC)	259	444	1067	414	58	37	94	89	120
Runaway Child	21	8	87	—	—	6	—	4	—
Socioeconomically Disadvantaged	12	58	19	14	8	—	16	—	—
Under/unemployed Persons	—	321	1569	339	6	2	71	23	242
Vietnamese/Cambodian Refugee	—	—	16	3	—	—	—	—	—
WIN	29	1274	3998	1735	123	208	52	103	102
Unwed Parent	—	—	503	6	—	30	—	12	—
Youth Status	—	—	1	—	—	—	—	—	—
TOTAL	**1080**	**6324**	**20595**	**4309**	**1117**	**1721**	**2003**	**843**	**1227**
% of Total	**2.75**	**16.12**	**52.51**	**10.99**	**2.85**	**4.39**	**5.11**	**2.15**	**3.13**

Prepared By Bureau of Statistical Services

EXHIBIT 19

UNITS RENDERED BY TARGET POPULATION BY DISTRICT

NOVEMBER 1975

Source: SSDS Report 401

ON	DISTRICT 1	2A	2B	3	4	5	6	7A	7B	Total	% of Total
	15	120	166	32	14	—	84	—	—	431	1.10
	75	212	482	65	34	—	—	12	—	880	2.24
	—	12	253	35	—	—	—	12	—	312	.80
	44	655	139	57	6	256	51	—	—	1208	3.08
	—	—	6	—	—	—	—	—	—	6	.02
	—	17	53	31	—	—	82	23	34	240	.61
	11	159	217	89	210	22	40	49	75	872	2.22
	245	1061	6322	776	305	819	652	266	529	10975	27.99
	102	286	1478	106	119	187	132	117	50	2577	6.57
	—	—	307	—	—	—	—	6	—	313	.80
	13	101	95	11	23	—	—	32	15	290	.74
	152	572	339	307	82	52	75	27	16	1622	4.14
	8	328	16	18	—	—	—	23	—	393	1.00
	—	—	114	—	—	—	—	—	—	114	.29
	53	489	2114	163	37	20	485	27	32	3420	8.72
	10	28	70	31	3	10	98	—	6	256	.65
	31	179	1164	77	89	72	71	18	6	1707	4.35
	259	444	1067	414	58	37	94	89	120	2582	6.58
	21	8	87	—	—	6	—	4	—	126	.32
antaged	12	58	19	14	8	—	16	—	—	127	.32
s	—	321	1569	339	6	2	71	23	242	2573	6.56
efugee	—	—	16	3	—	—	—	—	—	19	.05
	29	1274	3998	1735	123	208	52	103	102	7624	19.45
	—	—	503	6	—	30	—	12	—	551	1.40
	—	—	1	—	—	—	—	—	—	1	—
	1080	**6324**	**20595**	**4309**	**1117**	**1721**	**2003**	**843**	**1227**	**39219**	**100.00**
	2.75	**16.12**	**52.51**	**10.99**	**2.85**	**4.39**	**5.11**	**2.15**	**3.13**	**100.00**	

rvices

COST OF DIRECT SERVICES

The cost of providing social services by the Department of Social Services has not yet been developed to the unit of services level of detail. The number of ½ hour units rendered, does, however, provide a potentially useful figure for such purposes. Even without a sophisticated cost allocation system, a fair estimate of the cost of services might be made by dividing the total hours for each service into the total cost for all direct services.

Utah is designing a system for use by Fall, 1976, that will be much more accurate than this simple method. Its objective is to determine, for each service and unit rendered, the exact case worker cost with the appropriate indirect cost and overhead that burdens the individual service.

PURCHASED SERVICES

The unit used in the purchase of service varies depending upon the type of service and the vendor, and while some of the unit types are still under negotiation, the following are currently being used:

- Hour (1)
- Day (1)
- Week (1)
- Month (1)
- ½ day (1)
- Session (1)
- Ticket/trip (1)
- Mile (1)

The case worker refers to the code sheet (Exhibits 20, 21) when working with consumers to fill out the consumer information sheet and plan services. In the 'agency source' column in Exhibit 20 are the codes for services delivery by the Department of Social Services. The other two columns contain the purchase services code and state-negotiated rates per unit of service.

The purchase of service information and billing system is also operated by utilizing the video terminal network. Once agreements have been negotiated with a vendor, information about their services is entered into the system via the Provider File Addition Form (Exhibit 22) which includes the service code and the rate (unit) code. As services are rendered, the case worker completes the payment portion of the Social Service Plan Sheet indicating the rate negotiated and the type of unit. This information is entered into the automated system and a provider bill is generated with both consumer name(s) and units scheduled to be rendered for the time period (Exhibit 23).

The provider changes the units scheduled if they vary from the actual number of units, signs the statement, and returns it to the Department of Social Services. The case worker signs the statement, enters changes into the automated system, and computer-generated checks are produced for vendor payment.

Various reports, cut by vendor, service type, units scheduled and rendered, and space available, are produced at each provider agency.

EXHIBIT 20

SERVICE ACTIVITY CODES

AGENCY SOURCE

ACA	Adoption Court Activity
[illegible]	Adoption Placement/Supervision
[illegible]	Community Resources Connecting
DCA	Day Care Placement/Supervision, Adult
DCC	Day Care Placement/Supervision, Child
EDG	Education Guidance
EMG	Employment Counseling/Guidance
FCC	Instruction in Care of Children
FFC	Family Relations Counseling
FPC	Family Planning Counseling
HRG	Health Realated Guidance/Mediating
HCS	Home/Mngmt Connecting/Supervision
HHE	Home Economics
HHM	Homemaker
HIF	Housing Finding/Improvement Mediation
MCS	Mental Retardation Connecting/Supv.
MRE	Mental Retardation Evaluation
MRG	Mental Retardation Guidance
PIA	Protective Intervention Supv.,Adult
PFA	Protective Financial Arrangements
PIC	Protective Intervention, Child
PSS	Protective Supervision, Child
SAF	Substitute Plcmt/Supervision, Adult
SCF	Substitute Plcmt/Supervision, Child
SNF	Services to Natural Parents
SIS	Independent Living Supervision
SPR	Preparation/Placement/Return:Inst.Care

PURCHASE SOURCE

	Code	Kind	Rate
ADC	Alcohol/Drug Counseling	D - Daily	Contract
AFP	Adult Foster Payment	D - Daily	2.15
ALP	Attorney/Legal Payment	N - Personal Needs	130.00
ANP	Authorized Needs Payment	N - Personal Needs	25.00
BFP	Behavior Foster Payment	D - Daily	7.73/8.92
CFP	Child Foster Payment	D - Daily	4.26/4.84
CSP	Chore Service Payment	H - Hourly	3.50
DAP	Day Care (Adult Group) payment	D - Daily	4.60
		H - Hourly	.75
		L - Half Day	3.35
DCC	Day Care Supervision (Child)	M - Monthly	Contract
DFP	Day Care (Family) Payment	D - Daily	3.85
		H - Hourly	.60
		L - Half Day	3.00
DGP	Day Care (Group) Payment	D - Daily	4.60
		H - Hourly	.75
		L - Half Day	3.35
DHP	Day Care (Adult Family) Payment	D - Daily	3.85
		H - Hourly	.60
		L - Half Day	3.00
DSP	Day Care (Specialized) Payment	D - Daily	Contract
DTP	Day Care Transportation Payment	T - Trip/Ticket	50.00
		M - Monthly	50.00
		K - Mile	.12
EFP	Emergency Foster Payment	D - Daily	7.73/8.92
FCC	Family Functioning Counseling	Contract	Contract
FPC	Family Planning Counseling	Contract	Contract
GHP	Group Home Payment	D - Daily	7.86
		Contract	Contract
HEP	Home Mgt. Education Payment	M - Monthly	250.00
		W - Weekly	100.00
HHM	Homemaker	D - Daily	4.05
HLP	Homemaker Long Term	M - Monthly	225.00
HMP	Homemaker Emergency	D - Daily	30.00
HRG	Health Related Guidance	D - Daily	Contract
HRP	Home of Relative Payment	D - Daily	2.35
ICP	Initial Clothing Payment	N - Personal Needs	125.00
LEP	Lesson/Equipment Payment	M - Monthly	999.99
		W - Weekly	999.99
		S - Sessions	999.99
		N - Personal Needs	999.99
MRE	MR Evaluation	Contract	Contract
NWP	Navajo Works Project	M - Monthly	50.00
		K - Mile	.12
PGP	Protective Guardian Payment	H - Hourly	40.00
PTP	Parent (Foster) Training Pmt	S - Session	5.00
RFP	Group Rehabilitation Payment	D - Daily	Contract
SAP	Subsidized Adoption Payment	M - Monthly	999.99
SCF	Substitute Care Supv. (child)	D - Daily	Contract
SCP	Shelter Care Payment	D - Daily	6.00
SEM	Sheltered Employment (MR)	H - Hourly	Contract
		D - Daily	Contract
SFP	Specialized Foster Payment	D - Daily	8.53/10.69
SIS	Independent Living Supv	Contract	Contract
SMP	Shelter Medical Payment	N - Personal Needs	999.99
SPC	Self Care - MR	H - Hourly	Contract
SSP	Specialized Shelter Payment	D - Daily	8.50
STP	School Fees/Cost Payment	N - Personal Needs	999.99
TFP	Therapeutic Foster Payment	D - Daily	5.82/7.73
TRP	Transportation Payment	T - Ticket/Trip	50.00
		M - Monthly	50.00
		K - Mile	.12
XCP	Shelter Clothing Payment	N - Personal Needs	25.00

EXHIBIT 21

CODE SHEET

10/75

FORM 24 - CONSUMER INFORMATION SHEET

COUNTY

01	Beaver	16	Piute
02	Box Elder	17	Rich
03	Cache	18	Salt Lake
04	Carbon	19	San Juan
05	Daggett	20	Sanpete
06	Davis	21	Sevier
07	Duchesne	22	Summit
08	Emery	23	Tooele
09	Garfield	24	Uintah
10	Grand	25	Utah
11	Iron	26	Wasatch
12	Juab	27	Washington
13	Kane	28	Wayne
14	Millard	29	Weber
15	Morgan	99	Out of State

DISTRICT OFFICE

10	Logan	52	Nephi
11	Brigham City	53	Fillmore
12	Tremonton	60	Cedar City
20	Ogden	61	St. George
22	Layton	62	Beaver
23	Farmington	63	Kanab
24	Bountiful	64	Panguitch
30	Salt Lake	70	Vernal
31	Kearns	71	Roosevelt
32	Tooele	72	Duchesne
40	Provo	80	Price
41	Heber	81	Castle Dale
42	Park City	82	Moab
50	Richfield	90	Blanding
51	Manti	91	Navajo Mtn.

TARGET POPULATION

AC	Abused Child
AD	Adoption
AL	Alcoholism
BL	Blind
DA	Drug Addiction
DC	Day Care
DD	Developmentally Disabled
EM	Emotionally Handicapped
EL	Elderly
FC	Foster Care
FD	Family Dysfunctioning
MN	Medically Needy
MR	Mental Retardation
MY	Maladaptive Youth
NA	Exploited - Neglected Adult
NC	Neglected Child
PH	Physically Handicapped
RC	Runaway Child
SD	Socioeconomically Disadvantaged
UP	Under/Unemployed Persons
UW	Unwed Parents
VR	Vietnamese or Cambodian Refugee
WI	WIN Component
YS	Youth Status

PROGRAM OBJECTIVES

AC	Improve/maintain adjustment of person in alternate care placement.
AH	Standard, acceptable housing.
AS	Attainment of needed services and entitlements.
CF	Improve child functioning/development opportunity.
CL	Modification of hindering cultural and language factors.
CP	Ability to control pregnancy.
CS	Knowledge of community services.
DB	Modification of child/delinquent behavior.
DS	Development of skill and personal growth.
EM	Obtain/maintain employment.
ET	Progress/success in education training.
FA	Family acceptance and support of limitations requiring special treatment.
FG	Foster family guardianship.
FR	Modification of family relationships;
HM	Modification of household management skills.
IH	Maintenance or improvement of physical health.
IL	Independent living.
IP	Institutionalization for individual/community protection.
LT	Attain foster family long-term contract.
MF	Modification of personal functioning or mental health.
MM	Modification of money management skills.
OH	Maintenance of individual/families in their own home.
PH	Attainment of permanent adoptive home.
PR	Protection from abuse, neglect, and exploitation.
PS	Modification of parental skills.
RC	Return of individuals to community-based care.
RH	Individuals returned to their own homes.
RI	Provision of requested information to other agencies.
SC	Social contact and reduction of isolation.

ELIGIBILITY

C	AFDC	M	Medicaid
A	AFDC-FC	N	Income Eligible No Fee
E	Entry (AFDC-Only)	I	Income Eligible Fee
G	SSI Aged	W	Child Welfare
B	SSI Blind	U	Universal
D	SSI Disabled	X	Other

CLOSING REASON

GA	Goal Achieved
GM	Goal Maintained
OR	Objective Reached--Goal Not Achieved
ON	Objective Not Reached
AD	Administrative Closure - Reopen
CT	Consumer Transferred
DC	Dismissed by Court
DI	Died
LE	Loss of Eligibility
MA	Married
MV	Consumer Moved from Area
NC	No Contact

GRADE COMPLETED

01-12	Grades 1-12
13	Freshman Year in College or Vocational School
14	Sophomore Year
15	Junior Year
16	Senior Year
17	Graduate or Post Graduate Studies

LIVING ARRANGEMENTS

ABR	Board and Room
APJ	Prison/Jail
BRE	Rent
BOH	Own Home
BNH	Nursing Home
BSH	State Mental Hospital
BAF	American Fork Training School
BMF	Military Facilities
BAR	Alcoholic Rehabilitation Centers
BDR	Drug Rehabilitation Centers
BGH	Group Home
BMH	Maternity Home
BHR	Home of Relative
BFH	Foster Home
BOI	Other Institutions
BXX	All Other
CSI	State Industrial School
CAH	Adoptive Home
CIL	Independent Living
CDI	Public Institution - Detention
CPI	Private Institution
CSH	Shelter Home
CWP	With Parents

EXHIBIT 22

UTAH DIVISION OF FAMILY SERVICES

PROVIDER FILE ADDITION FORM

01 PROVIDER NAME			02 PROVIDER ID
MAILING ADDRESS 03 STREET			
04 EXTRA ADDRESS LINE			
05 CITY			06 STATE
07 ZIP CODE	08 COUNTY	09 DISTRICT	10 PHONE NO.
11 TYPE	12 LICENSE AGENCY	13 SCHOOL DISTRICT	

PAY TO ADDRESS

IF OTHER THAN

MAILING ADDRESS

14 STREET		
15 EXTRA ADDRESS LINE		
16 CITY		17
18 ZIP CODE		
19 WORKER NO.	20 DATE COMPLETE	
21 SPEC. CAP 1	22 SPEC. CAP 2	23 SPEC

24 SERVICE CODE	25 RATE CODE	26 LICENSE DATE	27 EXPIRE DATE	28 NUMBER CERTIFIED	29 CONTRACT NUMBER	30 CONTRACT ALLOCATION	COMMENT

DISTRICT APPROVAL ____________

EXHIBIT 22

Form 519

UTAH DIVISION OF FAMILY SERVICES

PROVIDER FILE ADDITION FORM

02 PROVIDER ID

06 STATE

COUNTY | 09 DISTRICT | 10 PHONE NO.

ENCY | 13 SCHOOL DISTRICT

PAY TO ADDRESS

IF OTHER THAN

MAILING ADDRESS

14 STREET

15 EXTRA ADDRESS LINE

16 CITY | 17 STATE

18 ZIP CODE

19 WORKER NO. | 20 DATE COMPLETE

21 SPEC. CAP 1 | 22 SPEC. CAP 2 | 23 SPEC. CAP 3

SE DATE	27 EXPIRE DATE	28 NUMBER CERTIFIED	29 CONTRACT NUMBER	30 CONTRACT ALLOCATION	COMMENTS

DISTRICT APPROVAL ______________________

UNIT OF SERVICE SYSTEMS

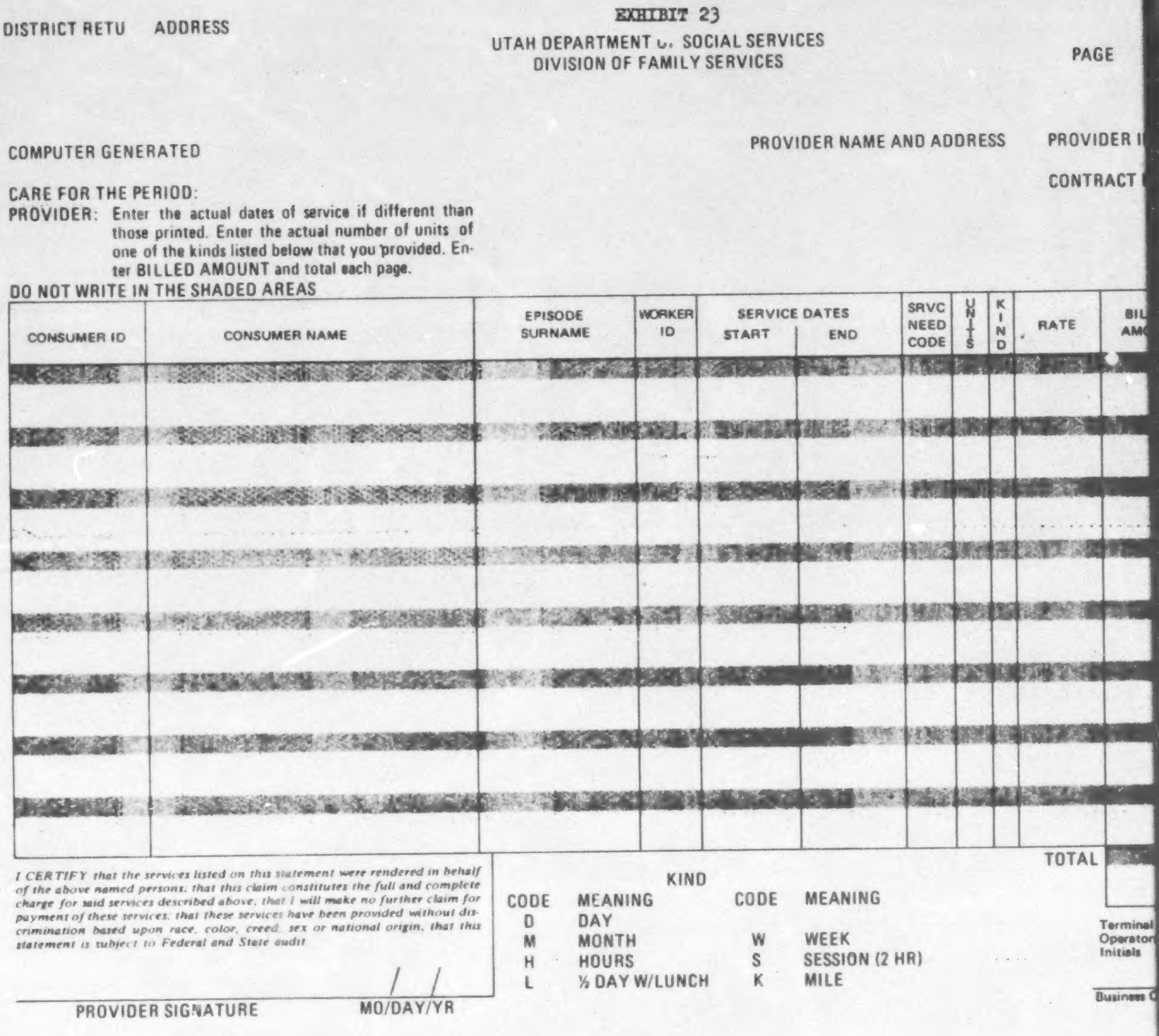


EXHIBIT 23

DISTRICT RETU ADDRESS

UTAH DEPARTMENT OF SOCIAL SERVICES
DIVISION OF FAMILY SERVICES

PAGE

COMPUTER GENERATED

PROVIDER NAME AND ADDRESS

PROVIDER I

CONTRACT

CARE FOR THE PERIOD:

PROVIDER: Enter the actual dates of service if different than those printed. Enter the actual number of units of one of the kinds listed below that you provided. Enter BILLED AMOUNT and total each page.

DO NOT WRITE IN THE SHADED AREAS

CONSUMER ID	CONSUMER NAME	EPISODE SURNAME	WORKER ID	SERVICE DATES START	SERVICE DATES END	SRVC NEED CODE	UNITS	KIND	RATE	BIL AMO
									TOTAL	

I CERTIFY that the services listed on this statement were rendered in behalf of the above named persons, that this claim constitutes the full and complete charge for said services described above, that I will make no further claim for payment of these services, that these services have been provided without discrimination based upon race, color, creed, sex or national origin, that this statement is subject to Federal and State audit.

PROVIDER SIGNATURE

/ /
MO/DAY/YR

KIND

CODE	MEANING	CODE	MEANING
D	DAY		
M	MONTH	W	WEEK
H	HOURS	S	SESSION (2 HR)
L	½ DAY W/LUNCH	K	MILE

Terminal
Operator
Initials

Business C

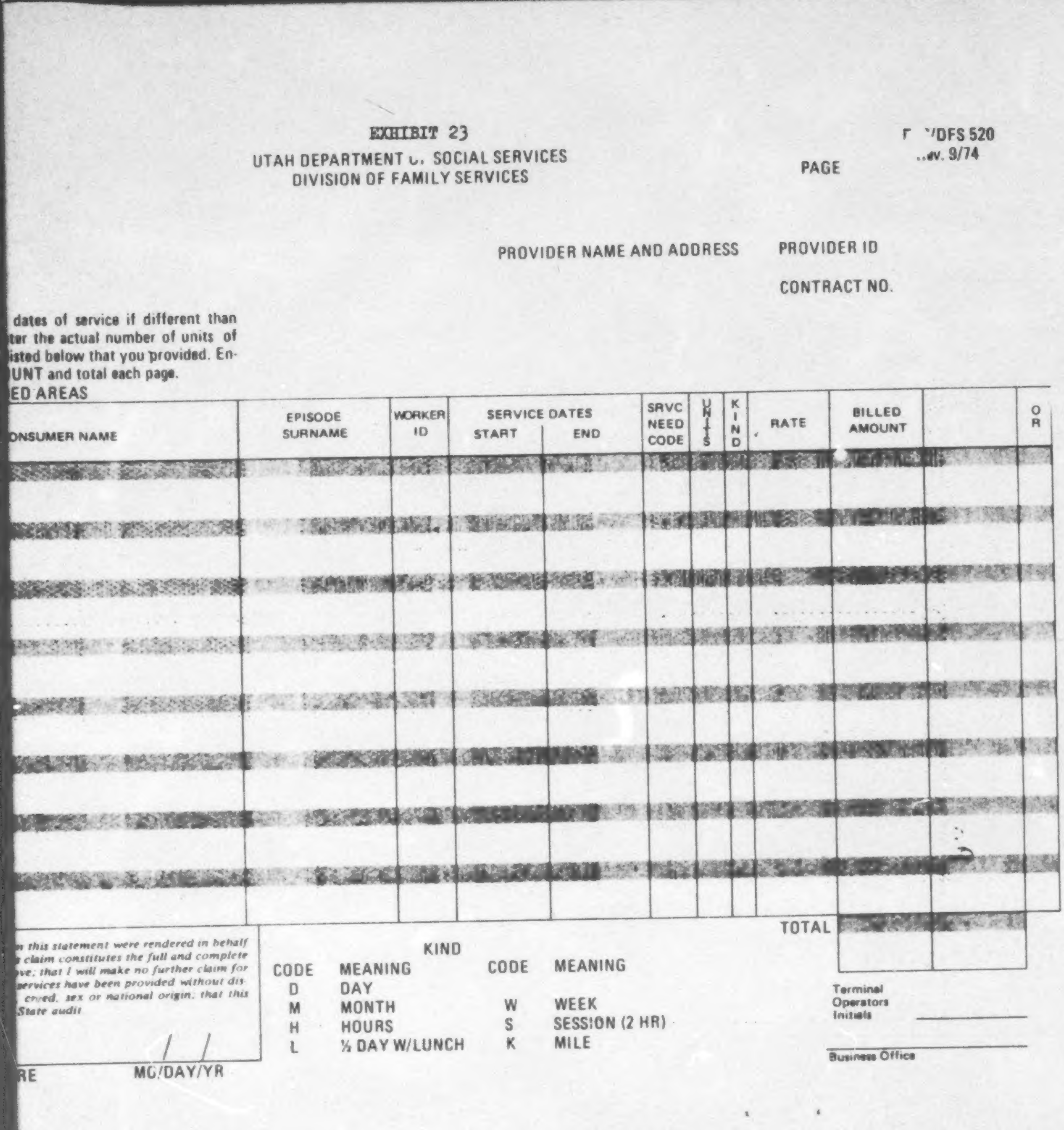


EXHIBIT 23

UTAH DEPARTMENT OF SOCIAL SERVICES
DIVISION OF FAMILY SERVICES

/DFS 520
..ev. 9/74

PAGE

PROVIDER NAME AND ADDRESS

PROVIDER ID

CONTRACT NO.

dates of service if different than
ter the actual number of units of
listed below that you provided. En-
UNT and total each page.
ED AREAS

ONSUMER NAME	EPISODE SURNAME	WORKER ID	SERVICE DATES START	SERVICE DATES END	SRVC NEED CODE	UNITS	KIND	RATE	BILLED AMOUNT		OR
								TOTAL			

n this statement were rendered in behalf
claim constitutes the full and complete
ove; that I will make no further claim for
services have been provided without dis-
creed, sex or national origin; that this
State audit

RE / /
MO/DAY/YR

KIND

CODE	MEANING	CODE	MEANING
D	DAY		
M	MONTH	W	WEEK
H	HOURS	S	SESSION (2 HR)
L	½ DAY W/LUNCH	K	MILE

Terminal Operators Initials

Business Office

EXHIBIT 24

1976 FIRST QUARTER IMPROVEMENT PROGRAM OBJECTIVES ADOPTIONS, FOSTER CARE UNITS

ADOPTION UNIT:

1. By March 31, 1976 place four children between the ages of one and eight in adoptive homes.
2. By March 31, 1976 return a total of twelve children to their natural parents.
3. By March 31, 1976 place one child in an adoptive home through the Subsidized Adoption Program.

FOSTER CARE:

1. By March 31, 1976 the Therapeutic Team will utilize at least 36 (90%) of available therapeutic foster care slots.
2. By March 31, 1976 the Specialized Team will utilize at least 37 (90%) of the available specialized foster care slots.
3. By March 31, 1976 the Behavioral Workers will utilize at least 54 (90%) of the avaiable behavioral foster care slots.
4. During the Quarter workers will visit children in Detention at least once each week.
5. During the Quarter workers will not allow episodes of service to become overdue in excess of three per cent.
6. By March 31, 1976, foster parents will be recruited and trained for foster placement utilization.
    a. Basic foster placement—at least five homes.
    b. Behavioral foster placement—at least five homes.
    c. Specialized foster placement—at least five homes.
    d. Therapeutic foster placement—at least five homes.
7. By March 31, 1976 recruit and train ten new foster homes for the emergency Foster Care Program.
8. By March 31, 1976 return home to their natural parents thirty children who are presently in foster care.
9. By March 31, 1976 arrange permanent plans for fifteen children who are presently in foster care and will not be returned home. This would include long-term foster care, adoption procedure or living independently.

PRODUCT OR OUTPUT UNITS

While Utah does not use an output or product unit as an integral part or their automated system, they do operate a Management by Objectives (MBO) at the supervisory level. As the objectives statements are similar to the product units described elsewhere in this document, an example is included (Exhibit 24) for reference purposes.

PROS AND CONS OF THE UTAH SYSTEM

Pros

- The system is operational—one of the few in the country
- Management *uses* the reports to make decisions
- The case workers are stimulated to render the 683 units in direct client time—a major management objective

- The unit provides an excellent basis for comparing alternative service delivery patterns. The unit has played an important part in providing an effective basis for negotiating and comparing provider rates with those of the Department.
- The historical data generated from the unit accurately indicates the average time required for each type of service during a quarter
- Purchase of Service system is relatively simple and apparently extremely effective

Cons

- Utah is a small state; whether such a system would be feasible or cost effective in a large state or major metropolitan area is unknown
- Applying standards or the 683 hours to a case worker may encourage 'faking' the data in order to look good, thereby damaging its accuracy
- The system may be overly complicated for its intended purpose
- Direct cost allocation system is incomplete

STATE OF NEBRASKA SOCIAL SERVICE INFORMATION SYSTEM

The Nebraska Department of Public Welfare has received a considerable amount of publicity in the information system field for their excellent work in implementing several sub-systems of the Medicaid Management Information System (MMIS). Parallel development has also been underway on a Social Services Information System (SSIS) that includes units of service. At present, the system is in use, but the social service delivery system is in the process of change and the SSIS will be modified as required to support such changes.

SYSTEM OVERVIEW

The Social Service Program in Nebraska is administered by the counties under the supervision of the State Department of Public Welfare. Social services are delivered primarily by private providers operating under contract to either the state or the counties. Although some services are provided directly by the county personnel, most county workers function solely to manage case activities, i.e., assess the client's need for services and monitor or evaluate the provision of the service.

The combination of so many private providers—some 6,000—coupled with the fact that the state provides all the matching dollars for Federal Financial Participation (FFP), has enabled Nebraska to design and operate a State-run information system for social services without the usual problems attendant to centralized systems in a State-supervised/county-administered system.

DIRECT DELIVERED SERVICE UNITS

Nebraska has an unusual approach to defining case management activities—the major component of their directly delivered services. Most of the other states have treated case management as an integral component of all services or, in some cases, defined it as a separate service.

In Nebraska, it is considered as overhead activity. The type of unit used for case management activities and the relatively small volume of other services that are provided directly by the public agency staff are based upon *time*—the time a worker spends in working with the client or client-related activity. The unit is recorded in one-half hour increments but it is not used as a case worker budgetary vehicle as it is in Utah. The Social Service Plan and Authorizations Form (Exhibit 25) is used to record the services and purchased services. Unit information is entered into the system from remote terminals located at DPW district offices or county offices. Appendix D is a summary sheet extracted from the case worker instruction manual that indicates units used for each service, the maximum amount of units that can be provided to a client in a month, and the dollar rate established for the purchased unit. At present, case management is not recorded on a unit basis but data is collected by time study.

As services are provided, both direct workers and contractors record the information for updating the client's file on the Social Services Billing document (Exhibit 26). Column 10—'Unit Rate' and Column 11—'charge' are used for purchased services only.

The State is going to institute new forms, more compatible with Title XX requirements, for this purpose after it exhausts an oversupply of old forms used previously just for purchased services.

PURCHASED UNITS OF SERVICES

Privately Purchased Services

Like Utah, Nebraska treats units of services utilized for purchase of service differently than units delivered directly.

Services are arranged for with the provider, with whom prior agreements have been negotiated, using the Social Service Provider Authorization Form (Exhibit 27). After the services have been provided, the provider submits the Social Service Billing Document, at least monthly or more frequently. The billing document must contain the number of units provided, the unit rate and the amount charged for each service.

The billing document is approved for payment by the county welfare office or DPW district office, and the information is then entered into the automated system both to update the client file and for payment purposes.

The types of units used for privately purchased services are mostly time-based (one hour, one day, one month), except for transportation units, expressed in miles or as a trip, and units relating to preparation and delivery of meals, expressed in numbers of meals.

Public Purchase

The state purchases services from one other state department—the Department of Public Institutions, Office of Mental Retardation. Services are authorized by DPW and arranged for with OMR in a similar manner to those purchased from private providers. The units of service, however, are unique to the mental retardation services. Exhibit 28 lists the units that are provided by the Office of Mental Retardation.

EXHIBIT 25

DSS-4 11 1 74

NEBRASKA DEPARTMENT OF PUBLIC WELFARE

SOCIAL SERVICE PLAN AND AUTHORIZATION

1 DATE: ____________ MONTH DAY YEAR

2 SUB-GOAL ________ 3 CURRENT STATUS ________ 4 ESTIMATED DATE OF GOAL ACHIEVEMENT ____________ MONTH DAY YEAR 5 SERVICE UNIT I.D ________ 6 SERVICE UNIT NAME ________

7 AUTHORIZATION NUMBER	8 CLIENT NUMBER	9 CLIENT NAME	AGE 10	BARRIER 11	SERVICE CODE 12	AUTHORIZATION PERIOD 13 FROM	14 THRU	TOTAL
00382291								
" 2								
" 3								
" 4								
" 5								
" 6								
" 7								
" 8								
" 9								

17 FORMER (F) ☐ POTENTIAL (P) ☐ CURRENT (C) ☐ NON-CATEGORIC (N) ☐

18 AGED (A) ☐ BLIND (B) ☐ DISABLED (D) ☐ ADC (C) ☐ OTHER (O) ☐

19 A ☐ C ☐ D ☐ M ☐ P ☐ FA ☐ FB ☐ O ☐

20 I have discussed this service plan with the client(s) named and we are in agreement with the services authorized.

____________ CASE MANAGER SIGNATURE DATE: ____________ MONTH DAY YEAR ____________ CASE MANAGER I.D

COPY 1 - STATE OFFICE

EXHIBIT 25

NEBRASKA DEPARTMENT OF PUBLIC WELFARE

SOCIAL SERVICE PLAN AND AUTHORIZATION

0038229

CURRENT STATUS ____________

4 ESTIMATED DATE OF GOAL ACHIEVEMENT ____________ MONTH DAY YEAR

SERVICE 5 UNIT I.D. ____________

SERVICE 6 UNIT NAME ____________

NT NUMBER	9 CLIENT NAME	AGE 10	BARRIER 11	SERVICE CODE 12	AUTHORIZATION PERIOD 13 FROM	14 THRU	TOTAL UNITS AUTHORIZED 15	UNIT RATE 16

(P) ☐ CURRENT (C) ☐ NON CATEGORIC (N) ☐

D (B) ☐ DISABLED (D) ☐ ADC (C) ☐ OTHER (O) ☐

☐ D ☐ M ☐ P ☐ FA ☐ FB ☐ O ☐

lan with the client(s) named and we
s authorized.

____________ SIGNATURE

DATE ____________ MONTH DAY YEAR

____________ CASE MANAGER I.D.

EXHIBIT 26

DSS 30 [illegible]

NEBRASKA DEPARTMENT OF PUBLIC WELFARE
SOCIAL SERVICES BILLING DOCUMENT

1 PROVIDER INFORMATION	(a) STAFF:		PURCHASED:		(b) SERVICE UNIT I.D.		NAME:

(C) PROVIDER NAME ____________________

PROVIDER ADDRESS ____________________

____

PROVIDER I.D. ____________________

TELEPHONE NO ____________________

CITY ____________________ STATE ______

	ADJ CODE 2	AUTHORIZATION NUMBER 3	CLIENT NUMBER 4	CLIENT NAME 5	SERVICE CODE 6	BILLING PERIOD		UNITS PROV 9	UNIT RATE 10
						7 FROM	8 THRU		
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
13									
14									
15									
16									
17									

The claimant hereby certifies that the foregoing claim is accurate. All services provided were in compliance with the Department of Public Welfare DSS4A Authorization of services to be provided previously issued. The claimant is aware that a false claim may result in prosecution for fraud. The above services for which payment is claimed were provided in accordance with the provisions of Title VI of the Civil Rights Act of 1964. Under penalty of applicable Federal and State laws, I certify that representations herein are true and complete and that no additional payment will be claimed.

13 ____________________ CLAIMANT SIGNATURE ______ MONTH DAY YEAR

TOTAL CHARGE 12

15 ____________________ SERVICE UNIT APPROVAL ______ MONTH DAY YEAR

ADJUSTED CHARGE 14 ______

COPY 1 - BILLING COPY

EXHIBIT 26

NEBRASKA DEPARTMENT OF PUBLIC WELFARE
SOCIAL SERVICES BILLING DOCUMENT

0116241

(a) STAFF		PURCHASED		(b) SERVICE UNIT I.D.		NAME

PROVIDER ADDRESS

CITY STATE ZIP

CLIENT NUMBER 4	CLIENT NAME 5	SERVICE CODE 6	BILLING PERIOD		UNITS PROV 9	UNIT RATE 10	CHARGE 11
			7 FROM	8 THRU			

oing claim is accurate. All services provided were
c Welfare DSS4A Authorization (of services to be
aware that a false claim may result in prosecution
ment is claimed were provided in accordance with
Act of 1964. Under penalty of applicable Federal
herein are true and complete, and that no addi

13 ______ CLAIMANT SIGNATURE ______ MONTH DAY YEAR

TOTAL CHARGE 12 ______

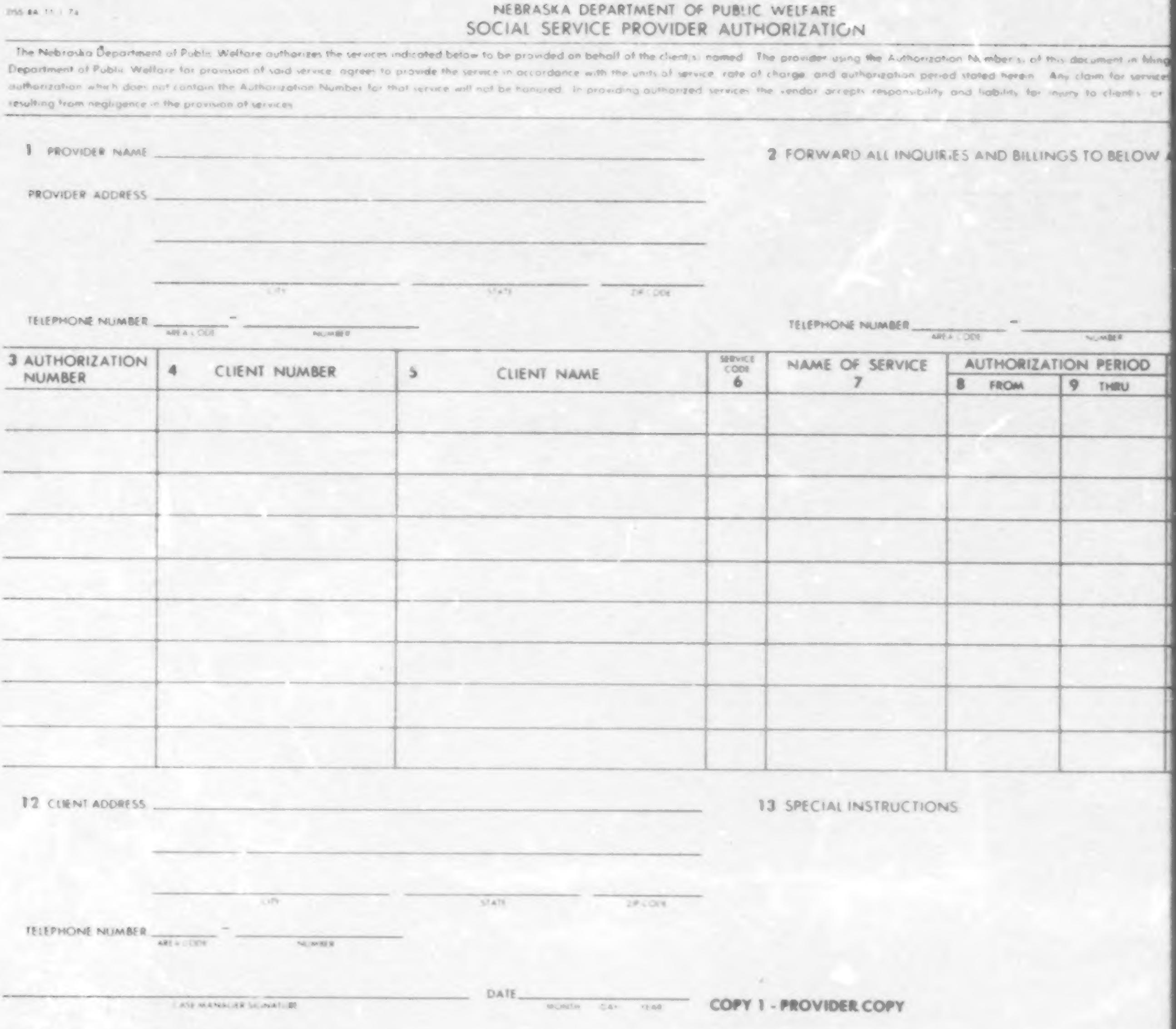
15 ______ SERVICE UNIT APPROVAL ______ MONTH DAY YEAR

ADJUSTED CHARGE 14 ______

COPY 1 - BILLING COPY

UNIT OF SERVICE SYSTEMS

EXHIBIT 27



DSS-8A 11-1-74

NEBRASKA DEPARTMENT OF PUBLIC WELFARE
SOCIAL SERVICE PROVIDER AUTHORIZATION

The Nebraska Department of Public Welfare authorizes the services indicated below to be provided on behalf of the client(s) named. The provider using the Authorization Number(s) of this document in filing
Department of Public Welfare for provision of said service, agrees to provide the service in accordance with the units of service, rate of charge, and authorization period stated herein. Any claim for service
authorization which does not contain the Authorization Number for that service will not be honored. In providing authorized services the vendor accepts responsibility and liability for injury to clients or
resulting from negligence in the provision of services.

1 PROVIDER NAME ____________________

PROVIDER ADDRESS ____________________

____

____________ CITY ____________ STATE ____________ ZIP CODE

TELEPHONE NUMBER ________ AREA CODE – ____________ NUMBER

2 FORWARD ALL INQUIRIES AND BILLINGS TO BELOW

TELEPHONE NUMBER ________ AREA CODE – ____________ NUMBER

3 AUTHORIZATION NUMBER	4 CLIENT NUMBER	5 CLIENT NAME	SERVICE CODE 6	NAME OF SERVICE 7	AUTHORIZATION PERIOD	
					8 FROM	9 THRU

12 CLIENT ADDRESS ____________________

____

____________ CITY ____________ STATE ____________ ZIP CODE

TELEPHONE NUMBER ________ AREA CODE – ____________ NUMBER

13 SPECIAL INSTRUCTIONS

____________________ CASE MANAGER SIGNATURE

DATE ____________ MONTH DAY YEAR

COPY 1 - PROVIDER COPY

EXHIBIT 27

NEBRASKA DEPARTMENT OF PUBLIC WELFARE

SOCIAL SERVICE PROVIDER AUTHORIZATION

lfare authorizes the services indicated below to be provided on behalf of the client(s) named. The provider using the Authorization Number(s) of this document in filing claim against the Nebraska on of said service, agrees to provide the service in accordance with the units of service, rate of charge and authorization period stated herein. Any claim for services provided as a result of this Authorization Number for that service will not be honored. In providing authorized services the vendor accepts responsibility and liability for injury to client(s) or damage to clients' property of services

CITY STATE ZIP CODE

NUMBER

2 FORWARD ALL INQUIRIES AND BILLINGS TO BELOW ADDRESS

TELEPHONE NUMBER ____________ - ________________
AREA CODE NUMBER

ENT NUMBER	5 CLIENT NAME	SERVICE CODE 6	NAME OF SERVICE 7	AUTHORIZATION PERIOD 8 FROM	9 THRU	MAX UNITS AUTH PER MONTH 10	UNIT RATE 11

13 SPECIAL INSTRUCTIONS

CITY STATE ZIP CODE

NUMBER

ER SIGNATURE DATE ____________
MONTH DAY YEAR

COPY 1 - PROVIDER COPY

EXHIBIT 28

CBMR SERVICES CODING SYSTEM

ADULT SERVICES (AGE 16 AND OLDER):		UNIT DEFINITION
1901	INITIAL VOCATIONAL EVALUATION	HR. OF DIR. PROGRAM
1902	ENTERPRISE ACTIVITIES	HR. OF DIR. PROGRAM
1903	BASIC SKILLS	HR. OF DIR. PROGRAM
1904	VOCATIONAL EDUCATION	HR. OF DIR. PROGRAM
VOCATIONAL TRAINING:		
1905	SPECIFIC JOB TRAINING	HR. OF JOB TRAINING
1906	ON-THE-JOB TRAINING SITES	HR. WORKING AT JOB
1907	WORK STATIONS IN INDUSTRY	HR. IN WORK STATION
1908	PLACEMENT	CONTACT HR. STAFF PRSNL.
1909	EMPLOYMENT FOLLOW-UP	CONTACT HR. STAFF PRSNL.
1910	VOCATIONAL EVALUATION (DRS)	DEFINED BY DRS
1920	ADULT TRAINING FOR INDEPENDENT LIVING	HR. OF DIR. PROGRAM
ADULT RESIDENTIAL SERVICES (MAINTENANCE):		
1930	GROUP LIVING-SMALL 2-5 RESIDENTS	NIGHT IN RESIDENCE
1931	GROUP LIVING-MEDIUM 6-10 RESIDENTS	NIGHT IN RESIDENCE
1932	DMU	NIGHT IN RESIDENCE
1933	SEMI-INDEPENDENT GROUP	NIGHT IN RESIDENCE
1934	SUPERVISED APARTMENT	NIGHT IN RESIDENCE
1935	STRUCTURED CORRECTIONAL	NIGHT IN RESIDENCE
YOUTH SERVICES		
EDUCATIONAL SERVICES (SCHOOL-AGED CLIENTS):		
1940	CHILD DEVELOPMENT CENTER	HR. OF DIR. PROGRAM
1941	HOMEBOUND	HR. OF DIR. PROGRAM
1942	DMU	HR. OF DIR. PROGRAM
1943	ADOLESCENT DEVELOPMENTAL CENTER	HR. OF DIR. PROGRAM
PRESCHOOL EDUCATIONAL SERVICES:		
1950	CHILD DEVELOPMENT CENTER	HR. OF DIR. PROGRAM
1951	HOMEBOUND	HR. OF DIR. PROGRAM
1952	DMU	HR. OF DIR. PROGRAM
1953	INTEGRATED COMMUNITY PRE-SCHOOL	HR. OF DIR. PROGRAM
1960	TRAINING FOR SOCIAL BEHAVIOR SKILLS ACHIEVEMENT	HR. OF DIR. PROGRAM
YOUTH RESIDENTIAL SERVICES (MAINTENANCE):		
1970	INDIVIDUAL PLACEMENT 1-2 RESIDENTS	NIGHT IN RESIDENCE
1971	GROUP LIVING-SMALL 3-5 RESIDENTS	NIGHT IN RESIDENCE
1972	GROUP LIVING-MEDIUM 6-8 RESIDENTS	NIGHT IN RESIDENCE
1973	DMU	NIGHT IN RESIDENCE
1974	CRISIS UNIT	NIGHT IN RESIDENCE
1975	STRUCTURED CORRECTIONAL	NIGHT IN RESIDENCE
GENERAL SERVICES		
ADMINISTRATIVE SUPPORT ACTIVITIES-DIRECT:		**DATA PROVIDED ON BILLING FORM**
1980	SOCIAL SERVICES	NO. OF DAYS DURING MONTH
1981	PHYSICAL THERAPY	CLIENT RECEIVED SERVICE
1982	SPEECH THERAPY	CLIENT RECEIVED SERVICE
1983	PSYCHOLOGICAL SERVICES	CLIENT RECEIVED SERVICE
1984	MOTOR DEVELOPMENT SERVICES	CLIENT RECEIVED SERVICE
1985	ADULT EVENING CLASSES	CLIENT RECEIVED SERVICE
1986	TRANSPORTATION	CLIENT RECEIVED SERVICE
1987	RECREATION	CLIENT RECEIVED SERVICE

It is interesting to note that the Office of Mental Retardation is grouped with other State mental health agencies within the Department of Public Institutions. Although that body is currently in the process of implementing an information system—the MSIS described elsewhere in this section—there is currently no plan to relate the MSIS to the DPW SSIS. Efforts at such a linkage were apparently unproductive due to the conceptual infancy of both systems at the time of negotiation.

MANAGEMENT REPORTS

The Nebraska Social Services Information System produces a variety of reports utilizing service units. Exhibit 29 is a county listing by client name indicating the type of services authorized, number of units authorized, number of units provided, period of authorization time and case worker I.D. number. The report is also organized by authorization number, district, and client name. (Exhibit 30)

Nebraska had experimented with a goal/barrier approach to service delivery, but with the new Title XX goal-reporting requirements and after unsatisfactory results with their barrier structure, a new approach along this line is currently being designed. Exhibit 31 shows the type of goal-related reporting produced by the current system.

An administrative report derived from the same data source (Exhibit K-9) shows, by client, the number of units provided, the provider name and organization, authorization number and rate per unit, amount billed by the provider and amount paid. NOTE: The illustration given contains only services delivered directly. Hence, no billings are shown.

COST ALLOCATION SYSTEM

The cost allocation system to support Title XX requirements is not yet completed but the contemplated approach resembles that used in other states. Since the purchased services costs are already collected as unit costs and most of the staff time for each service accumulated regularly in half-hour increments, the only evident problem is what constitutes overhead, and how to agree on a formula for allocating such costs to services.

PROS AND CONS OF THE SYSTEM

Pros

- Nebraska is one of the few states with an automated and fully-operative social services information system
- The collection of time on direct services is a necessary step for any unit of service development activity
- The purchase-of-service system, featuring maximum units authorized and maximum unit rates, is one of the best
- The volume of information available to management about unit rates, and cost and service delivery patterns also ranks above that available in other states.

EXHIBIT 29

STATE OF NEBRASKA
DEPARTMENT OF PUBLIC WELFARE
SOCIAL SERVICES - AUTH NO CROSS-REFERENCE LISTING
AS OF 04/17/76

CLIENT NAME	SERV CODE	AUTH PERIOD FROM	AUTH PERIOD THRU	TOTAL UNITS AUTH	UNITS PROV	UNIT RATE	CASE M
	0803	02/26/76	08/26/76	0048	0006	.00	14936
	0803	02/26/76	08/26/76	0048	0000	.00	14936
	0803	02/26/76	08/26/76	0048	0000	.00	14936
	0803	02/27/76	08/27/76	0048	0000	.00	14936
	0803	02/27/76	08/27/76	0048	0000	.00	14936
	0803	03/03/76	09/03/76	0048	0001	.00	14936
	0803	04/12/76	10/12/76	0048	0000	.00	14936
	0802	03/01/76	05/01/76	0016	0001	.00	14936
	0801	03/01/76	05/01/76	0016	0000	.00	14936
	0803	03/01/76	05/01/76	0016	0000	.00	14936
	0803	03/03/76	09/03/76	0048	0000	.00	14936
	0803	03/03/76	09/03/76	0048	0002	.00	14936
	0504	03/03/76	07/03/76	0032	0000	.00	14936
	0505	03/03/76	07/03/76	0032	0000	.00	14936
	0504	03/03/76	07/03/76	0032	0000	.00	14936
	0505	03/03/76	07/03/76	0032	0000	.00	14936
	0504	03/03/76	07/03/76	0032	0000	.00	14936
	0505	03/03/76	07/03/76	0032	0000	.00	14936
	0504	03/03/76	07/03/76	0032	0000	.00	14936
	0505	03/03/76	07/03/76	0032	0000	.00	14936
	0803	03/03/76	09/03/76	0048	0000	.00	14936
	0803	03/03/76	09/03/76	0048	0002	.00	14936
	0801	03/03/76	09/03/76	0032	0000	.00	14936
	0803	03/03/76	09/03/76	0048	0000	.00	14936
	0803	03/03/76	03/19/76	0048	0000	.00	14936
	0803	03/03/76	09/03/76	0048	0000	.00	14936
	0803	03/03/76	09/03/76	0048	0000	.00	14936
	0803	03/03/76	09/03/76	0048	0000	.00	14936
	0803	03/03/76	09/03/76	0048	0000	.00	14936
	0803	03/03/76	09/03/76	0048	0000	.00	14936
	0803	03/03/76	09/03/76	0046	0012	.00	00008

EXHIBIT 29

STATE OF NEBRASKA
DEPARTMENT OF PUBLIC WELFARE
CIAL SERVICES - AUTH NO CROSS-REFERENCE LISTING
AS OF 04/17/76

NAME	SERV CODE	AUTH PERIOD FROM	AUTH PERIOD THRU	TOTAL UNITS AUTH	UNITS PROV	UNIT RATE	CASE MGR ID
	0803	02/26/76	08/26/76	0048	0006	.00	14936
	0803	02/26/76	08/26/76	0048	0000	.00	14936
	0803	02/26/76	08/26/76	0048	0000	.00	14936
	0803	02/27/76	08/27/76	0048	0000	.00	14936
	0803	02/27/76	08/27/76	0048	0000	.00	14936
	0803	03/03/76	09/03/76	0048	0001	.00	14936
	0803	04/12/76	10/12/76	0048	0000	.00	14936
	0802	03/01/76	05/01/76	0016	0001	.00	14936
	0801	03/01/76	05/01/76	0016	0000	.00	14936
	0803	03/01/76	05/01/76	0016	0000	.00	14936
	0803	03/03/76	09/03/76	0048	0000	.00	14936
	0803	03/03/76	09/03/76	0048	0002	.00	14936
	0504	03/03/76	07/03/76	0032	0000	.00	14936
	0505	03/03/76	07/03/76	0032	0000	.00	14936
	0504	03/03/76	07/03/76	0032	0000	.00	14936
	0505	03/03/76	07/03/76	0032	0000	.00	14936
	0504	03/03/76	07/03/76	0032	0000	.00	14936
	0505	03/03/76	07/03/76	0032	0000	.00	14936
	0504	03/03/76	07/03/76	0032	0000	.00	14936
	0505	03/03/76	07/03/76	0032	0000	.00	14936
	0803	03/03/76	09/03/76	0048	0000	.00	14936
	0803	03/03/76	09/03/76	0048	0002	.00	14936
	0801	03/03/76	09/02/76	0032	0000	.00	14936
	0803	03/03/76	09/03/76	0048	0000	.00	14936
	0803	03/03/76	03/19/76	0048	0000	.00	14936
	0803	03/03/76	09/03/76	0048	0000	.00	14936
	0803	03/03/76	09/03/76	0048	0000	.00	14936
	0803	03/03/76	09/03/76	0048	0000	.00	14936
	0803	03/03/76	09/03/76	0048	0000	.00	14936
	0803	03/03/76	09/03/76	0048	0000	.00	14936
	0803	03/03/76	09/03/76	0048	0012	.00	00008

EXHIBIT 30

STATE OF NEBRASKA
DEPARTMENT OF PUBLIC WELFARE
SOCIAL SERVICES - CLIENT NAME CROSS-REFERENCE LISTING
AS OF 04/17/76

CLIENT NUMBER	AUTH NUMBER	SERV CODE	AUTH PERIOD FROM	AUTH PERIOD THRU	TOTAL UNITS AUTH	UNITS PROV	UNIT RATE
40020	00564211	0310	01/27/76	06/30/76	0156	0039	6.50
20002	00454891	1102	12/01/75	05/31/76	0180	0066	.00
10020	00454561	0306	10/01/75	03/31/76	0156	0104	4.00
10020	00564621	0306	04/01/76	04/30/76	0026	0000	2.18
10020	00564622	0306	05/01/76	09/30/76	0130	0000	3.18
10020	00454351	0310	09/01/75	02/28/76	0156	0023	6.50
10020	00454951	0306	11/19/75	02/29/76	0076	0070	4.00
10020	00564641	0306	03/17/76	08/31/76	0156	0009	4.00
60001	00564401	0902	01/23/76	02/21/76	0030	0015	25.00
70001	00564721	0902	04/05/76	05/04/76	0030	0000	25.00
50020	00564141	0310	12/01/75	05/30/76	0156	0062	6.50
70001	00564321	0902	02/01/76	03/01/76	0030	0030	25.00
60022	00345943	0310	08/01/75	01/31/76	0156	0017	5.53
80020	00564071	0310	12/11/75	05/31/76	0156	0013	6.50
80020	00454111	0310	08/11/75	01/31/76	0156	0000	6.50
80021	00454112	0310	08/11/75	01/31/76	0156	0000	6.50
80021	00564072	0310	12/11/75	05/31/76	0156	0013	6.50
80022	00454113	0310	08/11/75	01/31/76	0156	0000	6.50
40020	00564111	0309	02/01/76	07/31/76	0624	0058	1.03
40020	00454381	0309	08/01/75	01/31/76	0624	0114	1.06
40022	00564113	0310	02/01/76	07/31/76	0156	0042	5.61
40022	00454383	0310	08/01/75	01/31/76	0156	0076	5.53
40021	00564112	0310	02/01/76	07/31/76	0156	0043	5.61
40021	00454382	0309	08/01/75	01/31/76	0624	0108	1.06
40021	00454831	0310	11/01/75	01/31/76	0078	0049	5.53
70020	00564101	0309	01/08/76	05/31/76	0240	0041	.98
70020	00454971	0310	11/19/75	04/30/76	0156	0080	6.50
80020	00454371	0310	09/01/75	01/31/76	0156	0000	6.18
10001	00564701	0902	04/04/76	05/03/76	0030	0000	25.00
40020	00564391	0310	02/11/76	06/04/76	0104	0029	6.50
50020	00454923	0310	12/22/75	01/31/76	0008	0000	6.50
50020	00454401	0309	09/01/75	01/31/76	0624	0099	1.25

EXHIBIT 30

STATE OF NEBRASKA
DEPARTMENT OF PUBLIC WELFARE
OCIAL SERVICES - CLIENT NAME CROSS-REFERENCE LISTING
AS OF 04/17/76

UMBER	AUTH NUMBER	SERV CODE	AUTH PERIOD FROM	AUTH PERIOD THRU	TOTAL UNITS AUTH	UNITS PROV	UNIT RATE	CASE MGR ID
40020	00564211	0310	01/27/76	06/30/76	0156	0039	6.50	50670
20002	00454891	1102	12/01/75	05/31/76	0180	0066	.00	50670
10020	00454561	0306	10/01/75	03/31/76	0156	0104	4.00	50670
10020	00564621	0306	04/01/76	04/30/76	0026	0000	2.18	50670
10020	00564622	0306	05/01/76	09/30/76	0130	0000	3.18	50670
10020	00454351	0310	09/01/75	02/28/76	0156	0023	6.50	50670
10020	00454951	0306	11/19/75	02/29/76	0076	0070	4.00	50670
10020	00564641	0306	03/17/76	08/31/76	0156	0009	4.00	50670
60001	00564401	0902	01/23/76	02/21/76	0030	0015	25.00	50670
70001	00564721	0902	04/05/76	05/04/76	0030	0000	25.00	50670
50020	00564141	0310	12/01/75	05/30/76	0156	0062	6.50	50670
70001	00564321	0902	02/01/76	03/01/76	0030	0030	25.00	50670
60022	00345943	0310	08/01/75	01/31/76	0156	0017	5.53	50670
80020	00564071	0310	12/11/75	05/31/76	0156	0013	6.50	50670
80020	00454111	0310	08/11/75	01/31/76	0156	0000	6.50	50670
80021	00454112	0310	08/11/75	01/31/76	0156	0000	6.50	50670
80021	00564072	0310	12/11/75	05/31/76	0156	0013	6.50	50670
80022	00454113	0310	08/11/75	01/31/76	0156	0000	6.50	50670
40020	00564111	0309	02/01/76	07/31/76	0624	0058	1.03	50670
40020	00454381	0309	08/01/75	01/31/76	0624	0114	1.06	50670
40022	00564113	0310	02/01/76	07/31/76	0156	0042	5.61	50670
40022	00454383	0310	08/01/75	01/31/76	0156	0076	5.53	50670
40021	00564112	0310	02/01/76	07/31/76	0156	0043	5.61	50670
40021	00454382	0309	08/01/75	01/31/76	0624	0108	1.06	50670
40021	00454831	0310	11/01/75	01/31/76	0078	0049	5.53	50670
70020	00564101	0309	01/08/76	05/31/76	0240	0041	.98	50670
70020	00454971	0310	11/19/75	04/30/76	0156	0080	6.50	50670
80020	00454371	0310	09/01/75	01/31/76	0156	0000	6.18	50670
10001	00564701	0902	04/04/76	05/03/76	0030	0000	25.00	50670
40020	00564391	0310	02/11/76	06/04/76	0104	0029	6.50	50670
50020	00454923	0310	12/22/75	01/31/76	0008	0000	6.50	50670
50020	00454401	0309	09/01/75	01/31/76	0624	0099	1.25	50670

EXHIBIT 31

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                         STATE OF NEBRASKA
                   DEPARTMENT OF PUBLIC WELFARE
               SOCIAL SERVICES - SERVICE PLANS ON FILE
                          AS OF 03/21/76

        CASE MANAGER 000-00-0616

STATUS  SUB       GOAL   BARRIERS  SERVICES    UNITS       AUTHORIZATION        LAST  T
        GOAL      ACHN                         AUTH           PERIOD            ACT   C

                 ELIG=  C    TYPE CLIENT= CU   AGE=  20
  11    010     08/04/76     99        3599    0000     03/04/76 TO 08/04/76  0/00 0

                 ELIG=  C    TYPE CLIENT= CU   AGE=   1
  11    010     08/04/76     01        0301    0624     03/04/76 TO 08/04/76  0/00 0
```

EXHIBIT 31

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      STATE OF NEBRASKA
EPARTMENT OF PUBLIC WELFARE
L SERVICES - SERVICE PLANS ON FILE
       AS OF 03/21/76

 000-00-0616

DAL     BARRIERS  SERVICES     UNITS        AUTHORIZATION       LAST  TERM   DATE
CHN                            AUTH            PERIOD           ACT   CODE


IG=  C      TYPE CLIENT= CU    AGE=  20
04/76       99        3599     0000      03/04/76 TO 08/04/76   0/00 000   00/00/00

IG=  C      TYPE CLIENT= CU    AGE=   1
04/76       01        0301     0624      03/04/76 TO 08/04/76   0/00 000   00/00/00
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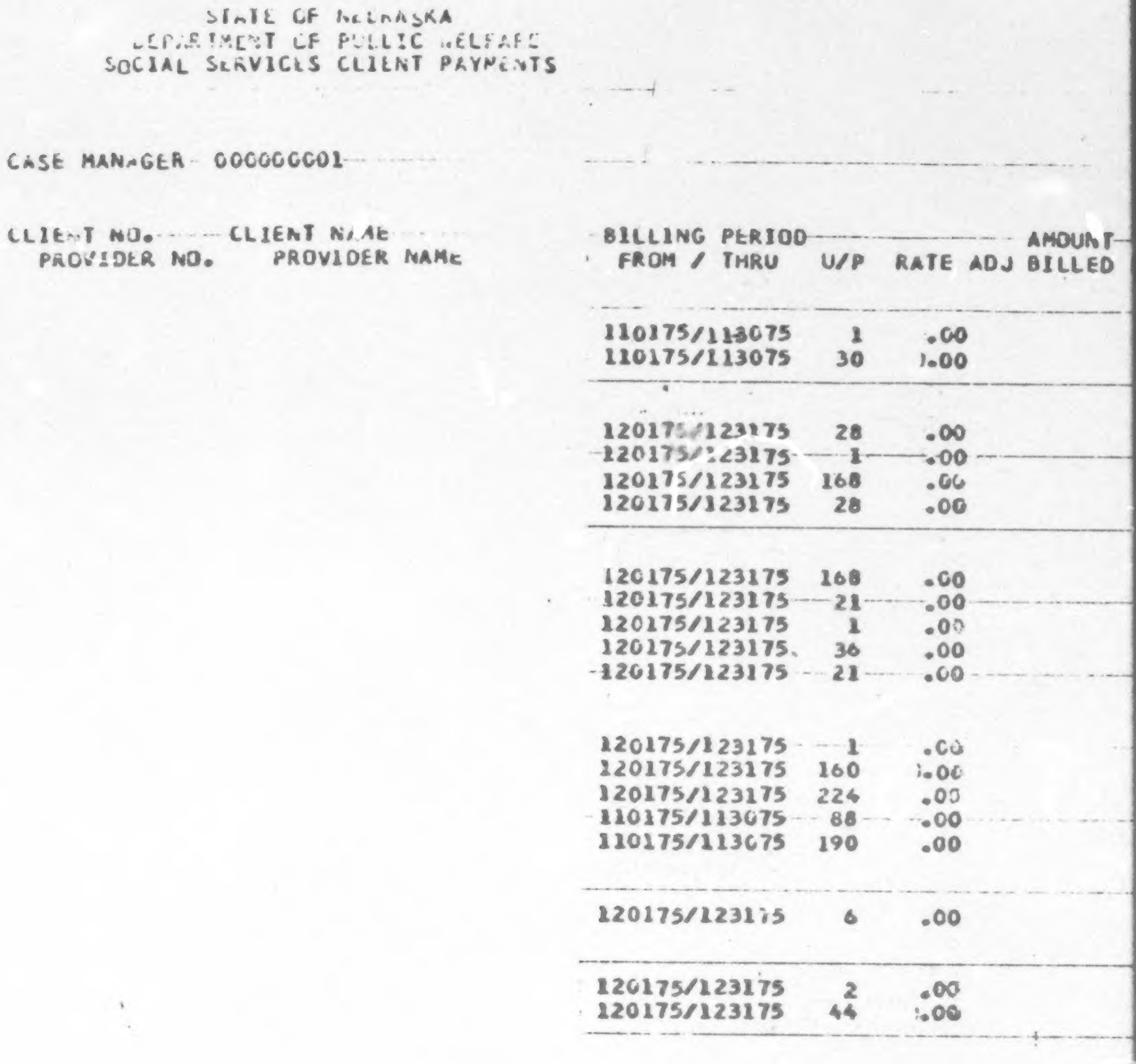
EXHIBIT 32



```
                    STATE OF NEBRASKA
               DEPARTMENT OF PUBLIC WELFARE
            SOCIAL SERVICES CLIENT PAYMENTS


CASE MANAGER  000000001


CLIENT NO.     CLIENT NAME                  BILLING PERIOD                 AMOUNT
  PROVIDER NO.    PROVIDER NAME              FROM / THRU    U/P   RATE ADJ BILLED

                                             110175/113075    1    .00
                                             110175/113075   30    .00

                                             120175/123175   28    .00
                                             120175/123175    1    .00
                                             120175/123175  168    .00
                                             120175/123175   28    .00

                                             120175/123175  168    .00
                                             120175/123175   21    .00
                                             120175/123175    1    .00
                                             120175/123175   36    .00
                                             120175/123175   21    .00

                                             120175/123175    1    .00
                                             120175/123175  160    .00
                                             120175/123175  224    .00
                                             110175/113075   88    .00
                                             110175/113075  190    .00

                                             120175/123175    6    .00

                                             120175/123175    2    .00
                                             120175/123175   44    .00
```

EXHIBIT 32

```
       STATE OF NEBRASKA                                                  01/29/76
DEPARTMENT OF PUBLIC WELFARE                                              PAGE 1911
CIAL SERVICES CLIENT PAYMENTS

GER- 000000001

O.------CLIENT NAME               BILLING PERIOD-------------------AMOUNT---------AMOUNT
ER NO.      PROVIDER NAME          FROM / THRU   U/P  RATE ADJ BILLED FICA  PAID

                                  110175/113075    1    .00
                                  110175/113075   30    .00

                                  120175/123175   28    .00
                                  120175/123175    1    .00
                                  120175/123175  168    .00
                                  120175/123175   28    .00

                                  120175/123175  168    .00
                                  120175/123175   21    .00
                                  120175/123175    1    .00
                                  120175/123175   36    .00
                                  120175/123175   21    .00

                                  120175/123175    1    .00
                                  120175/123175  160    .00
                                  120175/123175  224    .00
                                  110175/113075   88    .00
                                  110175/113075  190    .00

                                  120175/123175    6    .00

                                  120175/123175    2    .00
                                  120175/123175   44    .00
```

Cons

- The present system for accumulating time and cost for case management activities adds unnecessary confusion to the aggregation of accurate management information
- Uncertain relationships between units and goals and goal status must be clarified
- Collecting units at the total service level may not provide sufficient detail for analysis of what is happening at the local level.

MENTAL HEALTH UNIT-OF-SERVICE SYSTEMS

ORANGE COUNTY CALIFORNIA MENTAL HEALTH MANAGEMENT INFORMATION SYSTEM

The Orange County Mental Health Management Information System provides record keeping and management reporting for over 150 public and private local agencies that participate in the county's mental health program.

System development was financed by program operating funds provided by the state at a ratio of 90% to 10% county funds. The system's annual operating cost is currently about $200,000 but it is expected to decrease to approximately $165,000 when the system operation is switched from purchased outside computer time to the county computer and from keypunched input to optical scanning.

DEVELOPMENT PROCESS

The system developer's original charge was to evaluate the county's Mental Health program during 1971, but a cursory investigation of departmental records revealed insufficient data and what information was available appeared in formats ill-suited to a fair evaluation.

The developers decided to institute a fresh approach to collecting and reporting program data that would allow management to identify information needed for administrative purposes at all levels and for an on-going program evaluation. A key component of that information would be expressed as "units of treatment" received by the patients and costs per unit.

From the very beginning, the planners attempted to involve everyone who would either provide or use the system's information. Group sessions were held on designing reports and defining the units of treatment. The latter task was accomplished by 'pooling' descriptions of 'treatment modes' provided by the participating agencies (Appendix E).

The system was designed so that it could produce both regular management reports and special reports upon request. Only a minimum number of management reports were produced initially and other reports were added as the need arose.

Treatment unit definitions are still periodically reviewed and new units added when required. All providers, public and private, are given an opportunity to participate in this process.

The primary developmental problem was communicating the concept behind the system to the computer contractor personnel who had to do the systems design and programming. Since the systems designer did not want computer people to dominate the design, he deliberately did not bring them in until the system design was well downstream. Consequently, they had great difficulty understanding the flow of the service delivery system and the logic of the transactions which took place. For example, the contractor never clearly understood the difference between one hour of service received by a client and one hour of service provided by a worker. Hoping to improve the situation, the system designer replaced the original computer firm. Although some of the same problems were still evident, the system was successfully implemented.

The system designers estimate that the entire developmental job cost them about $165,000, including outside consultants, both computer firms, internal staff and computer operation costs.

SYSTEM OVERVIEW

There are presently about 100,000 patients on the system. The client enters the system using the "Entry Document" (Exhibit 33), usually completed by an intake clerk. The patient is then referred to a therapist who initially diagnoses the problem and fills out an "Evaluation Sheet" (Exhibit 34). This form resembles a service plan, in that it contains estimates of "treatment modes" and "treatment units" which the therapist plans with the client (see items 17–22).

The client is then referred to a financial counselor who prorates the fee according to the client's income and ability to pay. All county residents are eligible for services, with very low income persons (or those receiving Federal assistance payment) receiving them for free. Client income redeterminations are made annually.

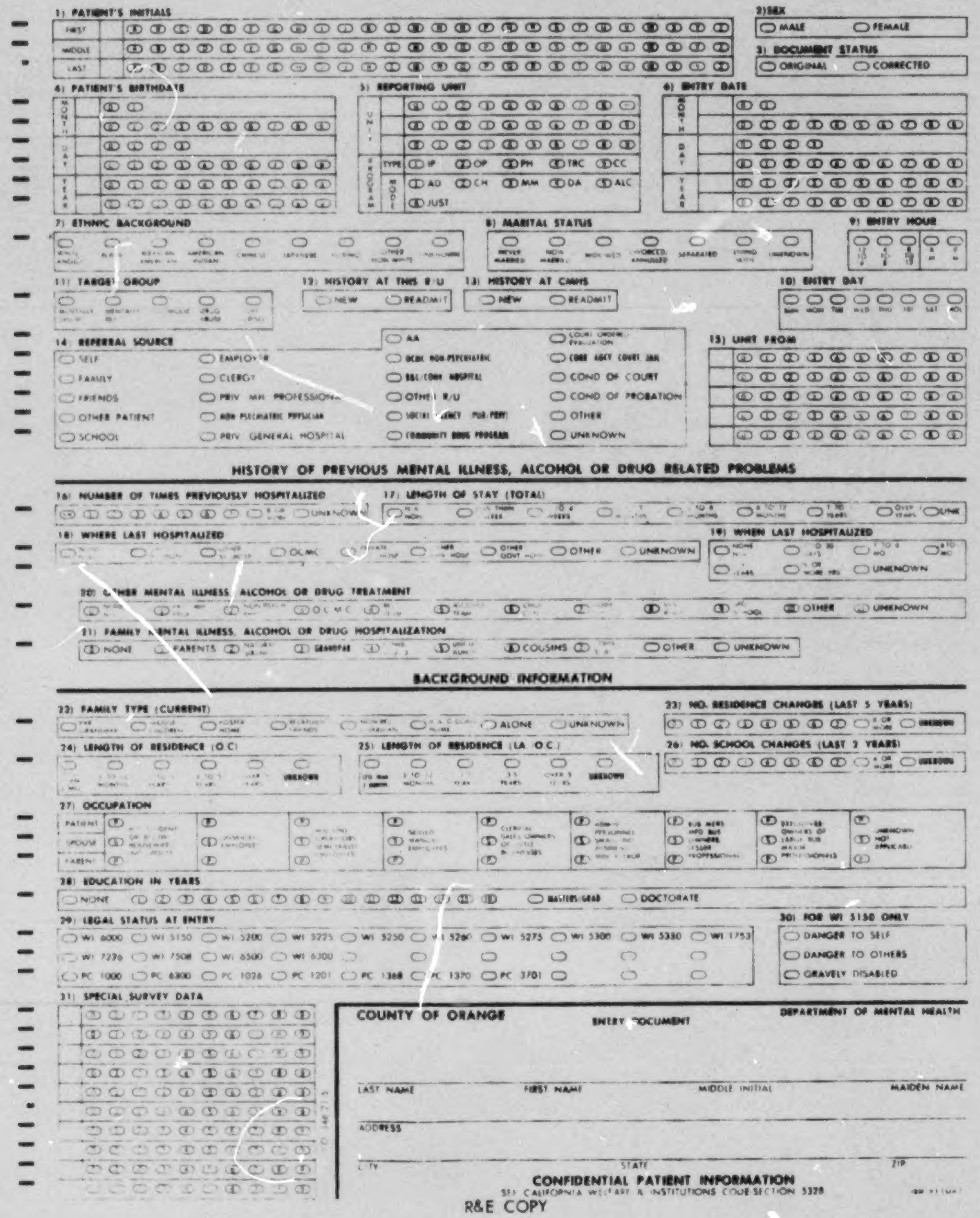
Income redetermination is done once a year. Fees collected for services go into the county general operating fund. This income from fees is estimated yearly along with estimated expenditures for the mental health program—another reason for needing to know the costs per unit of services and the expected units to be delivered.

After the patient begins receiving services, a record of services provided is documented on the "Services Rendered" form (Exhibit 35). The type of unit received, the number of hours received and identification of the provider type (therapist, M.D., social worker) is recorded on this form.

The units are recorded in the patient's record as hours and minutes (in 15 minute, 30 minute and 45 minute intervals) of various treatment modes received by the patient. The therapist records his identifier (a 4-digit code) on the record of each patient receiving the treatment. If there are two therapists giving treatment at the same time, each one records his code on the client record of each recipient. This data is then recorded as "hours received" in the client data file and as "hours provided" in the provider file, with this form being the only source for this information.

All fees collected for services go into the county general operating fund. Annual estimates of the total revenue from fees and of expenditures for the mental health program are prepared for use in making budgetary

EXHIBIT 33



IDENTIFICATION

1) PATIENT'S INITIALS: FIRST / MIDDLE / LAST

2) SEX: ○ MALE ○ FEMALE

3) DOCUMENT STATUS: ○ ORIGINAL ○ CORRECTED

4) PATIENT'S BIRTHDATE: MONTH / DAY / YEAR

5) REPORTING UNIT: UNIT; PROGRAM TYPE: ○ IP ○ OP ○ PH ○ TRC ○ CC; MODE: ○ AD ○ CH ○ MM ○ DA ○ ALC ○ JUST

6) ENTRY DATE: MONTH / DAY / YEAR

7) ETHNIC BACKGROUND

8) MARITAL STATUS: ○ NEVER MARRIED ○ NOW MARRIED ○ WIDOWED ○ DIVORCED/ANNULLED ○ SEPARATED ○ LIVING WITH ○ UNKNOWN

9) ENTRY HOUR

10) ENTRY DAY: ○ SUN ○ MON ○ TUE ○ WED ○ THU ○ FRI ○ SAT ○ HOL

11) TARGET GROUP

12) HISTORY AT THIS R/U: ○ NEW ○ READMIT

13) HISTORY AT CMHS: ○ NEW ○ READMIT

14) REFERRAL SOURCE

- ○ SELF
- ○ FAMILY
- ○ FRIENDS
- ○ OTHER PATIENT
- ○ SCHOOL
- ○ EMPLOYER
- ○ CLERGY
- ○ PRIV MH PROFESSIONAL
- ○ NON PSYCHIATRIC PHYSICIAN
- ○ PRIV GENERAL HOSPITAL
- ○ AA
- ○ OCMC NON-PSYCHIATRIC
- ○ REL/CONV HOSPITAL
- ○ OTHER R/U
- ○ SOCIAL AGENCY PUB/PRIV
- ○ COMMUNITY DRUG PROGRAM
- ○ COURT ORDERED EVALUATION
- ○ CORR AGCY COURT JAIL
- ○ COND OF COURT
- ○ COND OF PROBATION
- ○ OTHER
- ○ UNKNOWN

15) UNIT FROM

HISTORY OF PREVIOUS MENTAL ILLNESS, ALCOHOL OR DRUG RELATED PROBLEMS

16) NUMBER OF TIMES PREVIOUSLY HOSPITALIZED: ○ UNKNOWN

17) LENGTH OF STAY (TOTAL): ○ UNK

18) WHERE LAST HOSPITALIZED: ○ OCMC ○ OTHER ○ UNKNOWN

19) WHEN LAST HOSPITALIZED: ○ UNKNOWN

20) OTHER MENTAL ILLNESS, ALCOHOL OR DRUG TREATMENT: ○ OCMC ○ OTHER ○ UNKNOWN

21) FAMILY MENTAL ILLNESS, ALCOHOL OR DRUG HOSPITALIZATION: ○ NONE ○ PARENTS ○ GRANDPAR ○ COUSINS ○ OTHER ○ UNKNOWN

BACKGROUND INFORMATION

22) FAMILY TYPE (CURRENT): ○ ALONE ○ UNKNOWN

23) NO. RESIDENCE CHANGES (LAST 5 YEARS): ○ UNKNOWN

24) LENGTH OF RESIDENCE (O.C.): ○ UNKNOWN

25) LENGTH OF RESIDENCE (LA. O.C.): ○ UNKNOWN

26) NO. SCHOOL CHANGES (LAST 2 YEARS): ○ UNKNOWN

27) OCCUPATION: PATIENT / SPOUSE / PARENT

28) EDUCATION IN YEARS: ○ NONE ○ MASTERS/GRAD ○ DOCTORATE

29) LEGAL STATUS AT ENTRY

- ○ WI 6000 ○ WI 5150 ○ WI 5200 ○ WI 5225 ○ WI 5250 ○ WI 5260 ○ WI 5275 ○ WI 5300 ○ WI 5350 ○ WI 1753
- ○ WI 7276 ○ WI 7508 ○ WI 6500 ○ WI 6300
- ○ PC 1000 ○ PC 6300 ○ PC 1026 ○ PC 1201 ○ PC 1368 ○ PC 1370 ○ PC 3701

30) FOR WI 5150 ONLY

- ○ DANGER TO SELF
- ○ DANGER TO OTHERS
- ○ GRAVELY DISABLED

31) SPECIAL SURVEY DATA

COUNTY OF ORANGE ENTRY DOCUMENT DEPARTMENT OF MENTAL HEALTH

LAST NAME FIRST NAME MIDDLE INITIAL MAIDEN NAME

ADDRESS

CITY STATE ZIP

CONFIDENTIAL PATIENT INFORMATION

SEE CALIFORNIA WELFARE & INSTITUTIONS CODE SECTION 5328

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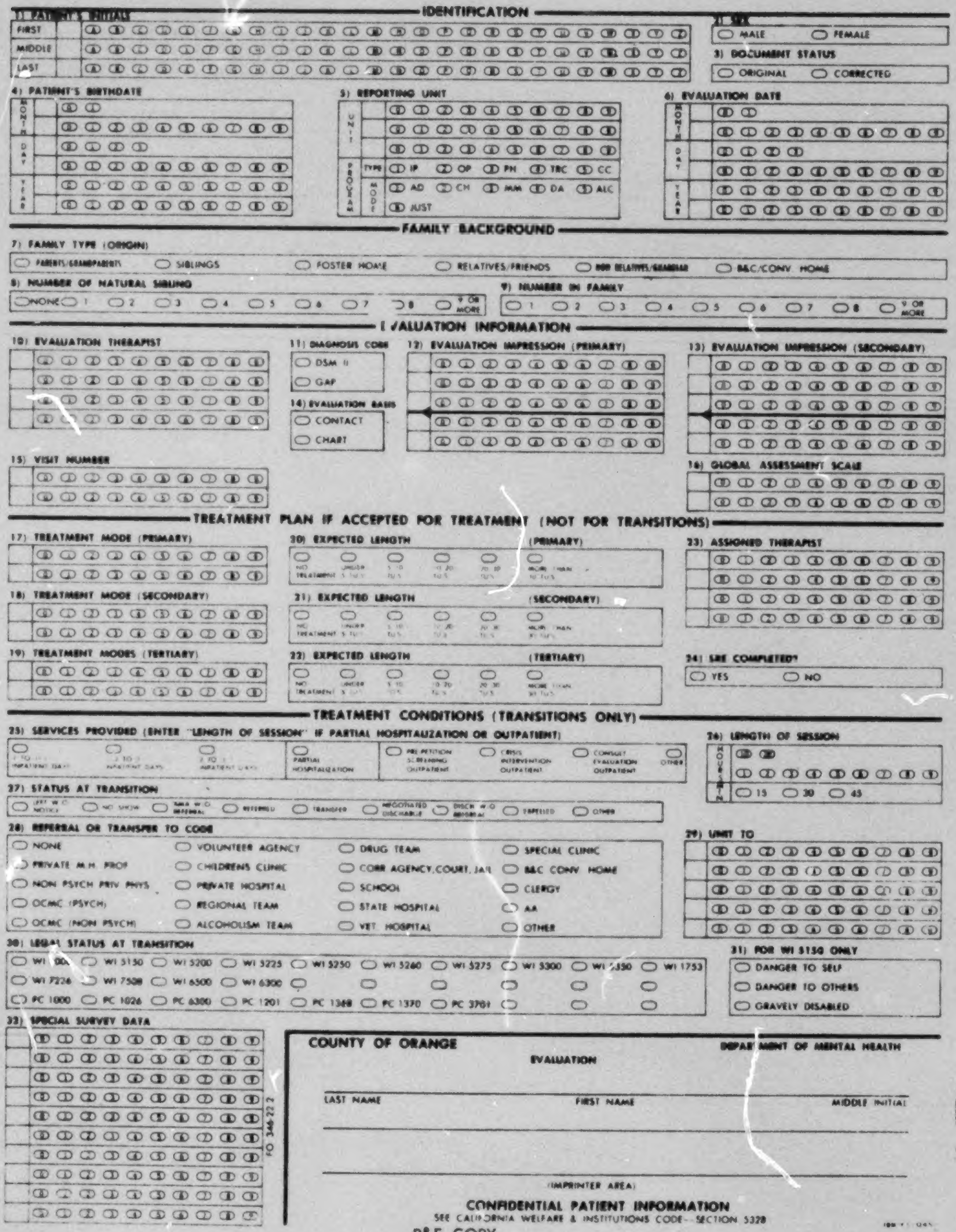
EXHIBIT 34



IDENTIFICATION

1) PATIENT'S INITIALS
FIRST
MIDDLE
LAST

2) SEX
○ MALE ○ FEMALE

3) DOCUMENT STATUS
○ ORIGINAL ○ CORRECTED

4) PATIENT'S BIRTHDATE
MONTH
DAY
YEAR

5) REPORTING UNIT
UNIT
PROGRAM TYPE ○ IP ○ OP ○ PH ○ TRC ○ CC
MODE ○ AD ○ CH ○ MM ○ DA ○ ALC ○ JUST

6) EVALUATION DATE
MONTH
DAY
YEAR

FAMILY BACKGROUND

7) FAMILY TYPE (ORIGIN)
○ PARENTS/GRANDPARENTS ○ SIBLINGS ○ FOSTER HOME ○ RELATIVES/FRIENDS ○ NON RELATIVES/GUARDIAN ○ B&C/CONV. HOME

8) NUMBER OF NATURAL SIBLING
○ NONE ○ 1 ○ 2 ○ 3 ○ 4 ○ 5 ○ 6 ○ 7 ○ 8 ○ 9 OR MORE

9) NUMBER IN FAMILY
○ 1 ○ 2 ○ 3 ○ 4 ○ 5 ○ 6 ○ 7 ○ 8 ○ 9 OR MORE

EVALUATION INFORMATION

10) EVALUATION THERAPIST

11) DIAGNOSIS CODE
○ DSM II
○ GAP

12) EVALUATION IMPRESSION (PRIMARY)

13) EVALUATION IMPRESSION (SECONDARY)

14) EVALUATION BASIS
○ CONTACT
○ CHART

15) VISIT NUMBER

16) GLOBAL ASSESSMENT SCALE

TREATMENT PLAN IF ACCEPTED FOR TREATMENT (NOT FOR TRANSITIONS)

17) TREATMENT MODE (PRIMARY)

18) TREATMENT MODE (SECONDARY)

19) TREATMENT MODES (TERTIARY)

20) EXPECTED LENGTH (PRIMARY)
○ NO TREATMENT ○ UNDER 5 TU'S ○ 5-10 TU'S ○ 10-20 TU'S ○ 20-30 TU'S ○ MORE THAN 30 TU'S

21) EXPECTED LENGTH (SECONDARY)
○ NO TREATMENT ○ UNDER 5 TU'S ○ 5-10 TU'S ○ 10-20 TU'S ○ 20-30 TU'S ○ MORE THAN 30 TU'S

22) EXPECTED LENGTH (TERTIARY)
○ NO TREATMENT ○ UNDER 5 TU'S ○ 5-10 TU'S ○ 10-20 TU'S ○ 20-30 TU'S ○ MORE THAN 30 TU'S

23) ASSIGNED THERAPIST

24) SRE COMPLETED?
○ YES ○ NO

TREATMENT CONDITIONS (TRANSITIONS ONLY)

25) SERVICES PROVIDED (ENTER "LENGTH OF SESSION" IF PARTIAL HOSPITALIZATION OR OUTPATIENT)
○ 1 TO 11 INPATIENT DAYS ○ 12 TO 30 INPATIENT DAYS ○ 31 TO INPATIENT DAYS ○ PARTIAL HOSPITALIZATION ○ PRE-PETITION SCREENING OUTPATIENT ○ CRISIS INTERVENTION OUTPATIENT ○ CONSULT EVALUATION OUTPATIENT ○ OTHER

26) LENGTH OF SESSION
HOURS
MIN ○ 15 ○ 30 ○ 45

27) STATUS AT TRANSITION
○ LEFT W/O NOTICE ○ NO SHOW ○ AMA W/O REFERRAL ○ REFERRED ○ TRANSFER ○ NEGOTIATED DISCHARGE ○ DISCH W/O REFERRAL ○ EXPELLED ○ OTHER

28) REFERRAL OR TRANSFER TO CODE
○ NONE ○ VOLUNTEER AGENCY ○ DRUG TEAM ○ SPECIAL CLINIC
○ PRIVATE M.H. PROF ○ CHILDRENS CLINIC ○ CORR AGENCY, COURT, JAIL ○ B&C CONV. HOME
○ NON PSYCH PRIV PHYS ○ PRIVATE HOSPITAL ○ SCHOOL ○ CLERGY
○ OCMC (PSYCH) ○ REGIONAL TEAM ○ STATE HOSPITAL ○ AA
○ OCMC (NON PSYCH) ○ ALCOHOLISM TEAM ○ VET. HOSPITAL ○ OTHER

29) UNIT TO

30) LEGAL STATUS AT TRANSITION
○ WI 5000 ○ WI 5150 ○ WI 5200 ○ WI 5225 ○ WI 5250 ○ WI 5260 ○ WI 5275 ○ WI 5300 ○ WI 5350 ○ WI 1753
○ WI 7226 ○ WI 7508 ○ WI 6500 ○ WI 6300 ○ ○ ○ ○ ○ ○
○ PC 1000 ○ PC 1026 ○ PC 6300 ○ PC 1201 ○ PC 1368 ○ PC 1370 ○ PC 3701 ○ ○ ○

31) FOR WI 5150 ONLY
○ DANGER TO SELF
○ DANGER TO OTHERS
○ GRAVELY DISABLED

32) SPECIAL SURVEY DATA

FO 346-22.2

COUNTY OF ORANGE DEPARTMENT OF MENTAL HEALTH
EVALUATION

LAST NAME FIRST NAME MIDDLE INITIAL

(IMPRINTER AREA)

CONFIDENTIAL PATIENT INFORMATION
SEE CALIFORNIA WELFARE & INSTITUTIONS CODE—SECTION 5328

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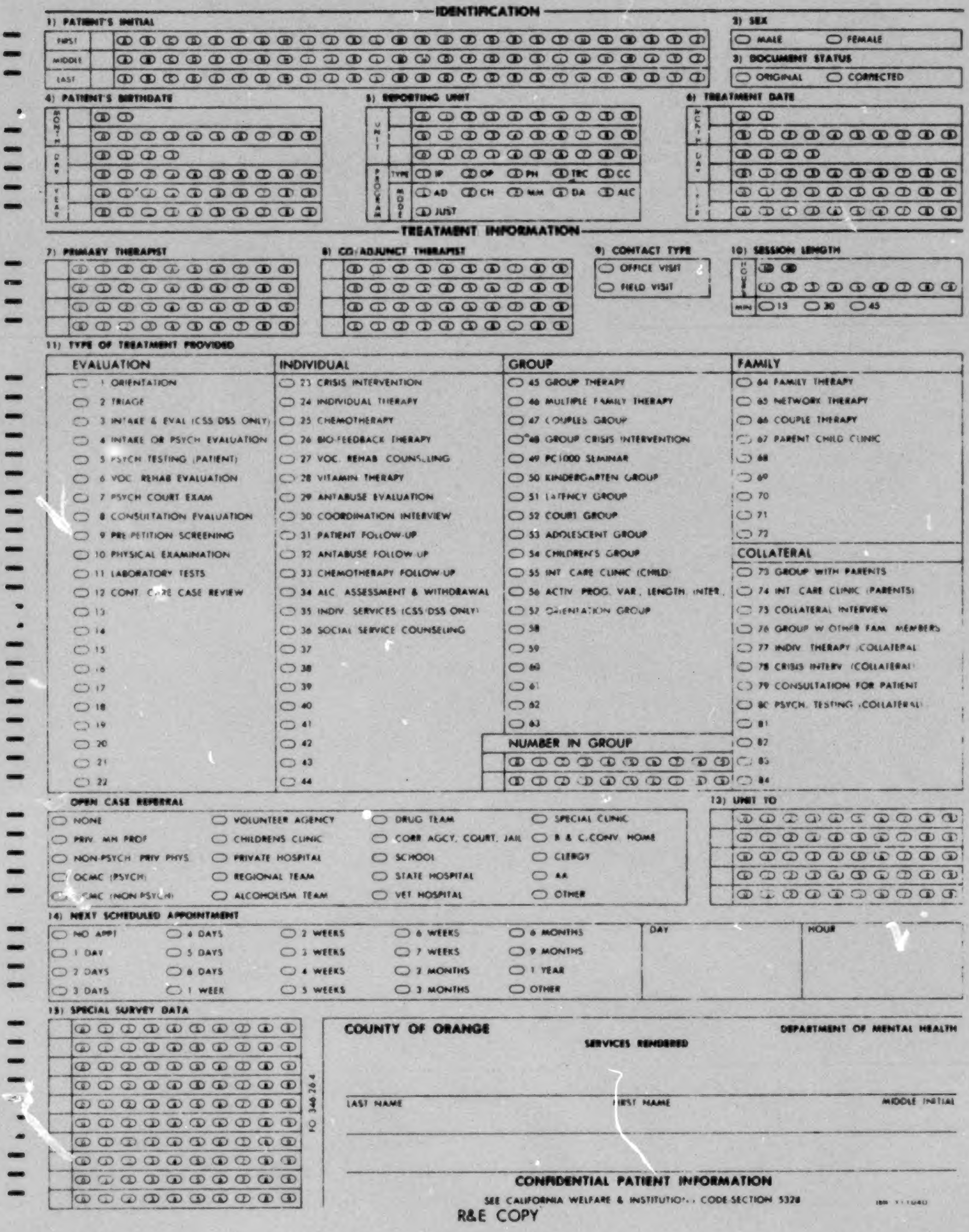
EXHIBIT 35



IDENTIFICATION

1) PATIENT'S INITIAL

FIRST

MIDDLE

LAST

2) SEX

○ MALE ○ FEMALE

3) DOCUMENT STATUS

○ ORIGINAL ○ CORRECTED

4) PATIENT'S BIRTHDATE

MONTH

DAY

YEAR

5) REPORTING UNIT

UNIT

PROGRAM

TYPE ○ IP ○ OP ○ PH ○ TRC ○ CC

MODE ○ AD ○ CH ○ MM ○ DA ○ ALC ○ JUST

6) TREATMENT DATE

MONTH

DAY

YEAR

TREATMENT INFORMATION

7) PRIMARY THERAPIST

8) CO/ADJUNCT THERAPIST

9) CONTACT TYPE

○ OFFICE VISIT

○ FIELD VISIT

10) SESSION LENGTH

HOURS

MIN ○ 15 ○ 30 ○ 45

11) TYPE OF TREATMENT PROVIDED

EVALUATION

○ 1 ORIENTATION
○ 2 TRIAGE
○ 3 INTAKE & EVAL (CSS DSS ONLY)
○ 4 INTAKE OR PSYCH EVALUATION
○ 5 PSYCH TESTING (PATIENT)
○ 6 VOC. REHAB EVALUATION
○ 7 PSYCH COURT EXAM
○ 8 CONSULTATION EVALUATION
○ 9 PRE PETITION SCREENING
○ 10 PHYSICAL EXAMINATION
○ 11 LABORATORY TESTS
○ 12 CONT. CARE CASE REVIEW
○ 13
○ 14
○ 15
○ 16
○ 17
○ 18
○ 19
○ 20
○ 21
○ 22

INDIVIDUAL

○ 23 CRISIS INTERVENTION
○ 24 INDIVIDUAL THERAPY
○ 25 CHEMOTHERAPY
○ 26 BIO-FEEDBACK THERAPY
○ 27 VOC. REHAB COUNSELING
○ 28 VITAMIN THERAPY
○ 29 ANTABUSE EVALUATION
○ 30 COORDINATION INTERVIEW
○ 31 PATIENT FOLLOW-UP
○ 32 ANTABUSE FOLLOW UP
○ 33 CHEMOTHERAPY FOLLOW UP
○ 34 ALC. ASSESSMENT & WITHDRAWAL
○ 35 INDIV. SERVICES (CSS/DSS ONLY)
○ 36 SOCIAL SERVICE COUNSELING
○ 37
○ 38
○ 39
○ 40
○ 41
○ 42
○ 43
○ 44

GROUP

○ 45 GROUP THERAPY
○ 46 MULTIPLE FAMILY THERAPY
○ 47 COUPLES GROUP
○ 48 GROUP CRISIS INTERVENTION
○ 49 PC1000 SEMINAR
○ 50 KINDERGARTEN GROUP
○ 51 LATENCY GROUP
○ 52 COURT GROUP
○ 53 ADOLESCENT GROUP
○ 54 CHILDREN'S GROUP
○ 55 INT. CARE CLINIC (CHILD)
○ 56 ACTIV. PROG. VAR. LENGTH INTER.
○ 57 ORIENTATION GROUP
○ 58
○ 59
○ 60
○ 61
○ 62
○ 63

NUMBER IN GROUP

FAMILY

○ 64 FAMILY THERAPY
○ 65 NETWORK THERAPY
○ 66 COUPLE THERAPY
○ 67 PARENT CHILD CLINIC
○ 68
○ 69
○ 70
○ 71
○ 72

COLLATERAL

○ 73 GROUP WITH PARENTS
○ 74 INT. CARE CLINIC (PARENTS)
○ 75 COLLATERAL INTERVIEW
○ 76 GROUP W OTHER FAM. MEMBERS
○ 77 INDIV. THERAPY (COLLATERAL)
○ 78 CRISIS INTERV. (COLLATERAL)
○ 79 CONSULTATION FOR PATIENT
○ 80 PSYCH. TESTING (COLLATERAL)
○ 81
○ 82
○ 83
○ 84

OPEN CASE REFERRAL

○ NONE
○ PRIV. MH PROF
○ NON-PSYCH. PRIV PHYS
○ OCMC (PSYCH)
○ OCMC (NON PSYCH)
○ VOLUNTEER AGENCY
○ CHILDRENS CLINIC
○ PRIVATE HOSPITAL
○ REGIONAL TEAM
○ ALCOHOLISM TEAM
○ DRUG TEAM
○ CORR AGCY, COURT, JAIL
○ SCHOOL
○ STATE HOSPITAL
○ VET HOSPITAL
○ SPECIAL CLINIC
○ B & C CONV. HOME
○ CLERGY
○ AA
○ OTHER

13) UNIT TO

14) NEXT SCHEDULED APPOINTMENT

○ NO APPT
○ 1 DAY
○ 2 DAYS
○ 3 DAYS
○ 4 DAYS
○ 5 DAYS
○ 6 DAYS
○ 1 WEEK
○ 2 WEEKS
○ 3 WEEKS
○ 4 WEEKS
○ 5 WEEKS
○ 6 WEEKS
○ 7 WEEKS
○ 2 MONTHS
○ 3 MONTHS
○ 6 MONTHS
○ 9 MONTHS
○ 1 YEAR
○ OTHER

DAY

HOUR

15) SPECIAL SURVEY DATA

PO 348 26 4

COUNTY OF ORANGE

DEPARTMENT OF MENTAL HEALTH

SERVICES RENDERED

LAST NAME

FIRST NAME

MIDDLE INITIAL

CONFIDENTIAL PATIENT INFORMATION

SEE CALIFORNIA WELFARE & INSTITUTIONS CODE SECTION 5328

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projections. Knowing the costs per unit of service and the expected units to be delivered would greatly facilitate the making of these projections.

After the patient begins receiving services, the type of unit, hours and provider type (therapist, M.D., social worker), are documented on the "Services Rendered" form (Exhibit 35).

The client's bill is also prepared from the same source. Using a rate per hour to correspond to the personnel classification of the provider, the number of hours is multiplied by that rate and the total computed. The client is then billed up to the amount that it has been determined he can pay. In most cases, this amount is divided by 12 and billed monthly.

A separate "Attendance Document" (Exhibit 36) is used to record hours of service for Partial Hospitalization services, In-Patient services and Methadone Maintenance services. The same type of information is recorded on this form and input into both the client and provider files.

When a patient leaves the system, a "Discharge Document" (Exhibit 37) closes the case leaving the inactive case history on file.

All files are updated monthly. The patients are identified by last name, year of birth and initials. The system designers consider this is a good technique for protecting confidentiality while providing unique client identifiers. All of the 150 provider agencies, public and private, use the same forms.

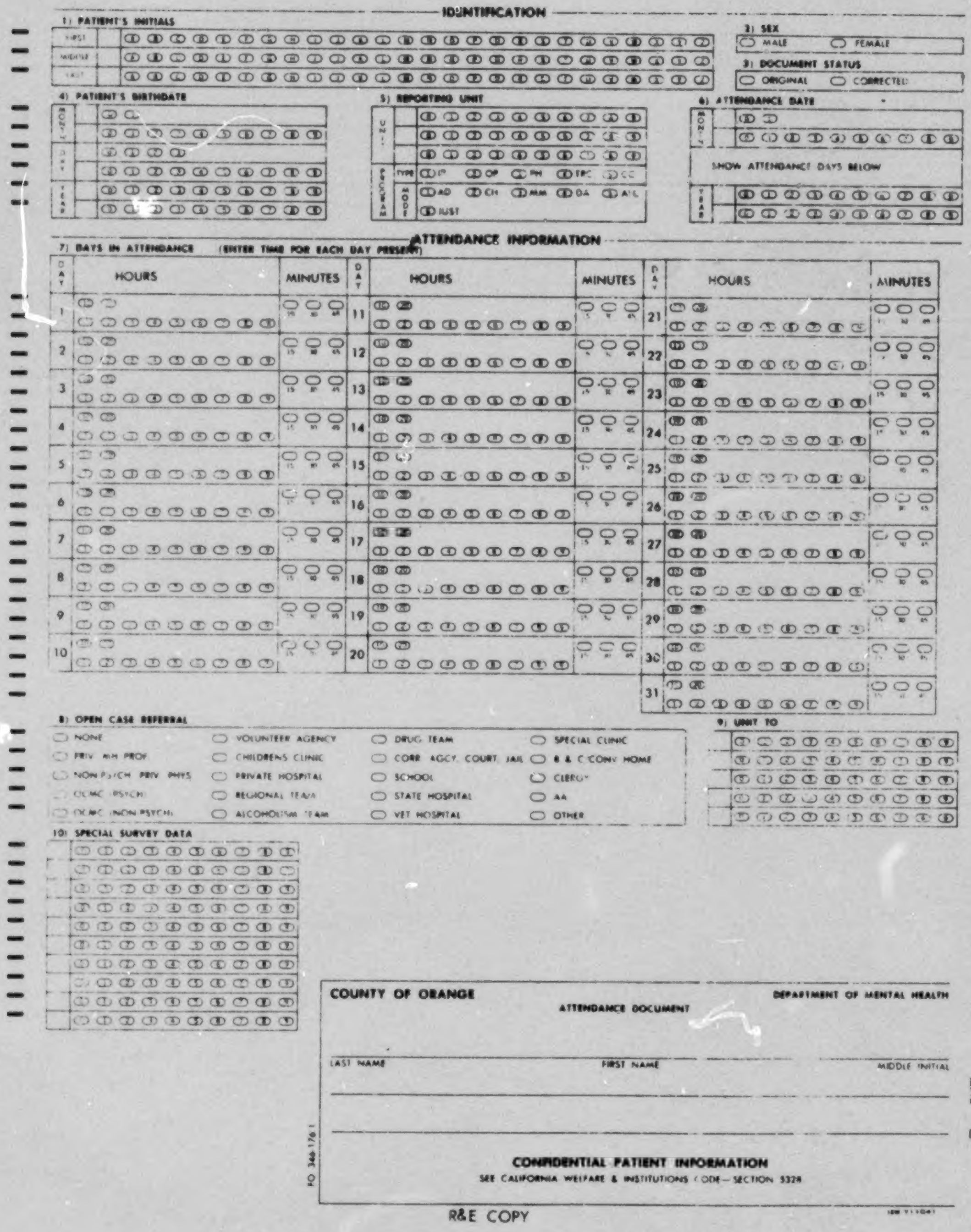
An additional form, "Indirect Services Document," records therapist time not spent with patients. The time recorded is input into the provider files and added to the total time expended by the therapist (this form has not yet been revised for optical scanning).

As new agencies with new treatment modes participate or as new treatment modes are identified, additions are made to the system of units, after coordination with all participants.

There are currently eight monthly management reports produced for county departmental management, provider management and case worker supervision. They are:

1. Caseload Activity/Case disposition
2. Admission/Discharge (by demographic characteristics)
3. Treatment units delivered by target group
   Alcohol
   Drugs
   Mental retardation
   Mentally disabled
   Life crises
4. Direct Service Activity (units of worker time by classification of worker type)
5. Entry Times of clients (by hour, by day of the week)

EXHIBIT 36



IDENTIFICATION

1) PATIENT'S INITIALS

FIRST

MIDDLE

LAST

2) SEX

○ MALE ○ FEMALE

3) DOCUMENT STATUS

○ ORIGINAL ○ CORRECTED

4) PATIENT'S BIRTHDATE

MONTH

DAY

YEAR

5) REPORTING UNIT

UNIT

PROGRAM

TYPE ○ IP ○ OP ○ PH ○ TPC ○ CC

MODE ○ AD ○ CH ○ MM ○ DA ○ A/L ○ JUST

6) ATTENDANCE DATE

MONTH

SHOW ATTENDANCE DAYS BELOW

YEAR

ATTENDANCE INFORMATION

7) DAYS IN ATTENDANCE (ENTER TIME FOR EACH DAY PRESENT)

DAY	HOURS	MINUTES	DAY	HOURS	MINUTES	DAY	HOURS	MINUTES
1			11			21		
2			12			22		
3			13			23		
4			14			24		
5			15			25		
6			16			26		
7			17			27		
8			18			28		
9			19			29		
10			20			30		
						31		

8) OPEN CASE REFERRAL

○ NONE
○ PRIV. MH PROF.
○ NON-PSYCH. PRIV. PHYS.
○ OCMC (PSYCH)
○ OCMC (NON-PSYCH)
○ VOLUNTEER AGENCY
○ CHILDRENS CLINIC
○ PRIVATE HOSPITAL
○ REGIONAL TEAM
○ ALCOHOLISM TEAM
○ DRUG TEAM
○ CORR. AGCY. COURT. JAIL
○ SCHOOL
○ STATE HOSPITAL
○ VET HOSPITAL
○ SPECIAL CLINIC
○ B & C/CONV HOME
○ CLERGY
○ AA
○ OTHER

9) UNIT TO

10) SPECIAL SURVEY DATA

COUNTY OF ORANGE — DEPARTMENT OF MENTAL HEALTH

ATTENDANCE DOCUMENT

LAST NAME — FIRST NAME — MIDDLE INITIAL

CONFIDENTIAL PATIENT INFORMATION

SEE CALIFORNIA WELFARE & INSTITUTIONS CODE—SECTION 5328

FO 346-176.1

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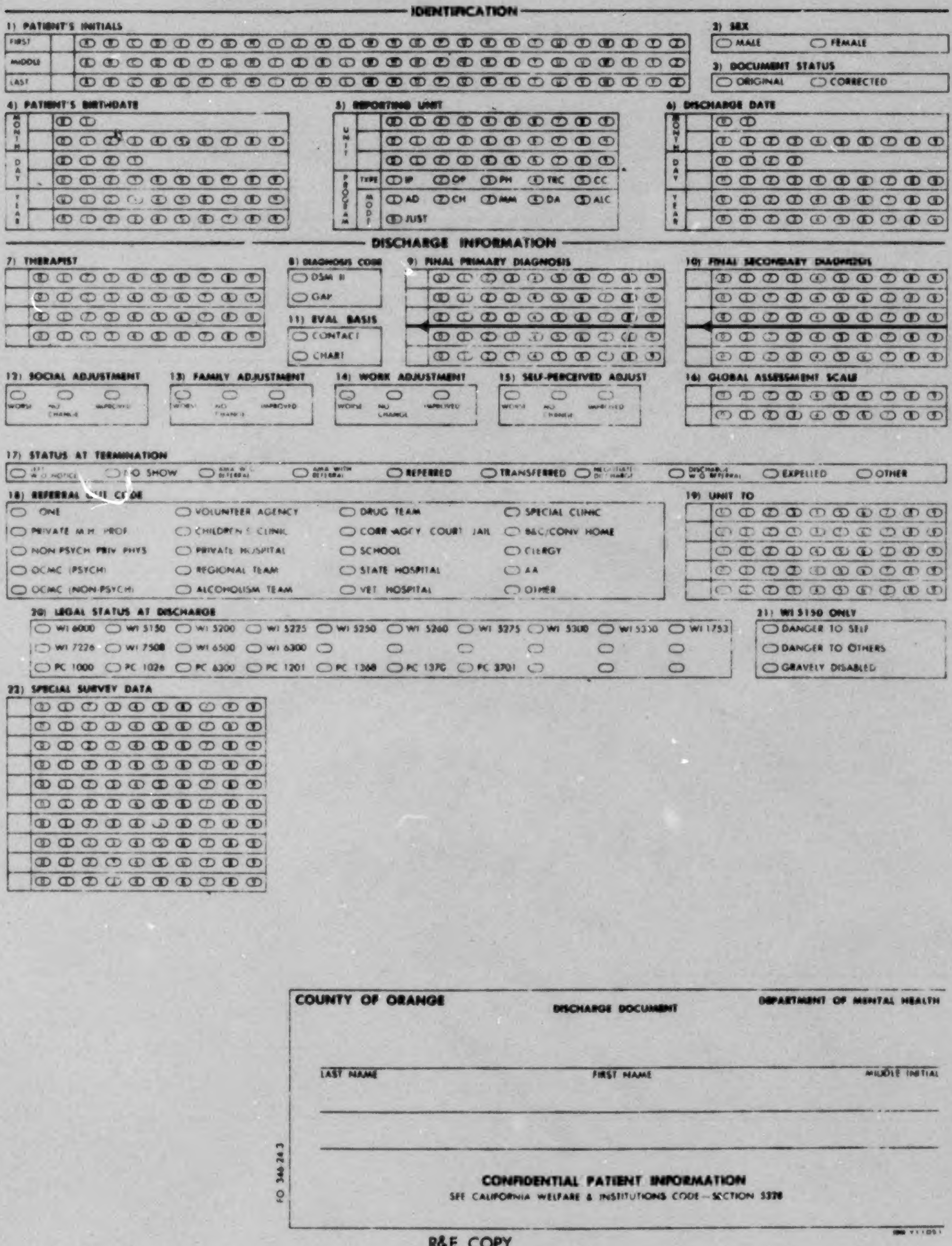
EXHIBIT 37



IDENTIFICATION

1) PATIENT'S INITIALS
FIRST
MIDDLE
LAST

2) SEX
○ MALE ○ FEMALE

3) DOCUMENT STATUS
○ ORIGINAL ○ CORRECTED

4) PATIENT'S BIRTHDATE
MONTH
DAY
YEAR

5) REPORTING UNIT
UNIT
PROGRAM
TYPE ○ IP ○ OP ○ PH ○ TRC ○ CC
MODE ○ AD ○ CH ○ MM ○ DA ○ ALC ○ JUST

6) DISCHARGE DATE
MONTH
DAY
YEAR

DISCHARGE INFORMATION

7) THERAPIST

8) DIAGNOSIS CODE
○ DSM II
○ GAP

9) FINAL PRIMARY DIAGNOSIS

10) FINAL SECONDARY DIAGNOSIS

11) EVAL BASIS
○ CONTACT
○ CHART

12) SOCIAL ADJUSTMENT
○ WORSE ○ NO CHANGE ○ IMPROVED

13) FAMILY ADJUSTMENT
○ WORSE ○ NO CHANGE ○ IMPROVED

14) WORK ADJUSTMENT
○ WORSE ○ NO CHANGE ○ IMPROVED

15) SELF-PERCEIVED ADJUST
○ WORSE ○ NO CHANGE ○ IMPROVED

16) GLOBAL ASSESSMENT SCALE

17) STATUS AT TERMINATION
○ LEFT W/O NOTICE ○ NO SHOW ○ AMA W/O REFERRAL ○ AMA WITH REFERRAL ○ REFERRED ○ TRANSFERRED ○ NEGOTIATED DISCHARGE ○ DISCHARGE W/O REFERRAL ○ EXPELLED ○ OTHER

18) REFERRAL UNIT CODE

○ ONE	○ VOLUNTEER AGENCY	○ DRUG TEAM	○ SPECIAL CLINIC
○ PRIVATE M.H. PROF	○ CHILDREN'S CLINIC	○ CORR AGCY COURT JAIL	○ B&C/CONV HOME
○ NON PSYCH PRIV PHYS	○ PRIVATE HOSPITAL	○ SCHOOL	○ CLERGY
○ OCMC (PSYCH)	○ REGIONAL TEAM	○ STATE HOSPITAL	○ AA
○ OCMC (NON-PSYCH)	○ ALCOHOLISM TEAM	○ VET HOSPITAL	○ OTHER

19) UNIT TO

20) LEGAL STATUS AT DISCHARGE

○ WI 6000	○ WI 5150	○ WI 5200	○ WI 5225	○ WI 5250	○ WI 5260	○ WI 5275	○ WI 5300	○ WI 5350	○ WI 1753
○ WI 7226	○ WI 7508	○ WI 6500	○ WI 6300	○	○	○	○	○	○
○ PC 1000	○ PC 1026	○ PC 6300	○ PC 1201	○ PC 1368	○ PC 1370	○ PC 3701	○	○	○

21) WI 5150 ONLY
○ DANGER TO SELF
○ DANGER TO OTHERS
○ GRAVELY DISABLED

22) SPECIAL SURVEY DATA

COUNTY OF ORANGE
DISCHARGE DOCUMENT
DEPARTMENT OF MENTAL HEALTH

LAST NAME FIRST NAME MIDDLE INITIAL

CONFIDENTIAL PATIENT INFORMATION
SEE CALIFORNIA WELFARE & INSTITUTIONS CODE—SECTION 5328

FO 346 24.3

R&E COPY

6. Treatment Units delivered (by type of treatment)
7. Total Worker Time (in hours by type of worker)
8. Patient Roster (a list of all patients)

The last report is not distributed, but kept available for worker reference in a central office. In the near future it will be converted directly onto microfilm from the computer file tapes and distributed to local offices, all of which have microfilm readers.

Exhibit 38 shows a summary of report #4—Direct Service Activity. The units delivered by type of worker have been summarized into standard treatment units, which primarily depict summary categories of the "treatment mode," i.e., individual therapy, family services, therapy, therapy services, group therapy services, etc. (The authors regret that they were unable to obtain copies of other reports; they were only available in unreducible computer format and there was no facility to produce "phony data" to protect confidentiality or eliminate actual data to show just the format.)

FUTURE OUTLOOK FOR THE SYSTEM

So far, many other counties in California and in several other States have investigated this system but none have formally adopted it. The designer feels that many of them have incorporated the ideas and concepts into their systems design and that there will be transfers in the future.

The designers do foresee future links to other human service programs within Orange County, probably social service and physical health services. They also predict that the number of patients will increase.

Their present efforts are directed at converting keypunch input to optical scanning and linking a system 32 in the Mental Health Department to the University of Southern California computer for use in research projects.

The standard file updates and monthly reporting will still be performed by the county computer but it cannot handle the required volume of special requests for research application.

SOME CONCLUSIONS

One of the reasons given by the system designers for the system's existence and quality is that the department itself is relatively new (only about 6 years old); there was no existing system or entrenched organization to be overcome.

Also, new legislation requiring a five-year Mental Health plan and more detailed reporting to the state provided added impetus for establishing a comprehensive information system.

The designers originally felt that including unit data was essential for establishing a base for determining outside provider rates. However, the units are now used for many other purposes, including in-house planning and budgeting.

MULTI-STATE INFORMATION SYSTEM (MSIS)

The MSIS is an automated Mental Health information system developed at the Research Center, Rockland State Hospital, Orangeburg, New York.

EXHIBIT 38

M.I.S. REPORT NUMBER MH01A301-J
COUNTY OF ORANGE
PA
REPORT PERIOD 4/01/75 THRU 6/30/75
DEPARTMENT OF MENTAL HEALTH
RUN
DIRECT SERVICE ACTIVITY REPORT FOR ALL REPORTING UNITS

STANDARD TREATMENT UNITS

PRIMARY THERAPIST		EVALUTION		INDIVIDUAL		FAMILY		GROUP		COLLATERAL		UNKNOWN	
		N	%	N	%	N	%	N	%	N	%	N	%
PSYCHIAT	CONTACTS	3421	18.4	7427	36.1	2199	19.7	9587	35.4	469	11.2	56	6.5
	S.T.U.'S	2134	14.1	2987	12.1	1231	15.3	1213	19.2	355	9.0	23	2.1
PSYCHOL	CONTACTS	2134	18.4	7427	36.1	2199	19.7	9587	35.4	469	11.2	56	6.5
	S.T.U.'S	2134	14.1	2987	12.1	1231	15.3	1213	19.2	355	9.0	23	2.1
SOC WKR	CONTACTS	2134	18.4	7427	36.1	2199	19.7	9587	35.4	469	11.2	56	6.5
	S.T.U.'S	3421	18.4	7427	36.1	2199	19.7	9587	35.4	469	11.2	56	6.5
NURSE	CONTACTS	2134	18.4	7427	36.1	2199	19.7	9587	35.4	469	11.2	56	6.5
	S.T.U.'S	3421	18.4	7427	36.1	2199	19.7	9587	35.4	469	11.2	56	6.5
VOLUN	CONTACTS	2134	18.4	7427	36.1	2199	19.7	9587	35.4	469	11.2	56	6.5
	S.T.U.'S	3421	18.4	7427	36.1	2199	19.7	9587	35.4	469	11.2	56	6.5
MHW 1-2	CONTACTS	2134	18.4	7427	36.1	2199	19.7	9587	35.4	469	11.2	56	6.5
	S.T.U.'S	3421	18.4	7427	36.1	2199	19.7	9587	35.4	469	11.2	56	6.5
MHW 3	CONTACTS	2134	18.4	7427	36.1	2199	19.7	9587	35.4	469	11.2	56	6.5
	S.T.U.'S	3421	18.4	7427	36.1	2199	19.7	9587	35.4	469	11.2	56	6.5
MHW 4	CONTACTS	2134	18.4	7427	36.1	2199	19.7	9587	35.4	469	11.2	56	6.5
	S.T.U.'S	3421	18.4	7427	36.1	2199	19.7	9587	35.4	469	11.2	56	6.5
OTH PROF	CONTACTS	2134	18.4	7427	36.1	2199	19.7	9587	35.4	469	11.2	56	6.5
	S.T.U.'S	3421	18.4	7427	36.1	2199	19.7	9587	35.4	469	11.2	56	6.5
STUDENT	CONTACTS	2134	18.4	7427	36.1	2199	19.7	9587	35.4	469	11.2	56	6.5
	S.T.U.'S	3421	18.4	7427	36.1	2199	19.7	9587	35.4	469	11.2	56	6.5
TOTAL	CONTACTS	2134	18.4	7427	36.1	2199	19.7	9587	35.4	469	11.2	56	6.5
	S.T.U.'S	3421	18.4	7427	36.1	2199	19.7	9587	35.4	469	11.2	56	6.5

EXHIBIT 38

1A301-J
RU 6/30/75

COUNTY OF ORANGE
DEPARTMENT OF MENTAL HEALTH

PAGE NUMBER 6
RUN DATE 7/15/75

REPORT FOR ALL REPORTING UNITS

STANDARD TREATMENT UNITS

EVALUTION		INDIVIDUAL		FAMILY		GROUP		COLLATERAL		UNKNOWN		TOTAL	
N	%	N	%	N	%	N	%	N	%	N	%	N	%
3421	18.4	7427	36.1	2199	19.7	9587	35.4	469	11.2	56	6.5	19542	100.0
2134	14.1	2987	12.1	1231	15.3	1213	19.2	355	9.0	23	2.1	11671	100.0
2134	18.4	7427	36.1	2199	19.7	9587	35.4	469	11.2	56	6.5	19542	100.0
2134	14.1	2987	12.1	1231	15.3	1213	19.2	355	9.0	23	2.1	11671	100.0
2134	18.4	7427	36.1	2199	19.7	9587	35.4	469	11.2	56	6.5	19542	100.0
3421	18.4	7427	36.1	2199	19.7	9587	35.4	469	11.2	56	6.5	19542	100.0
2134	18.4	7427	36.1	2199	19.7	9587	35.4	469	11.2	56	6.5	19542	100.0
3421	18.4	7427	36.1	2199	19.7	9587	35.4	469	11.2	56	6.5	19542	100.0
2134	18.4	7427	36.1	2199	19.7	9587	35.4	469	11.2	56	6.5	19542	100.0
3421	18.4	7427	36.1	2199	19.7	9587	35.4	469	11.2	56	6.5	19542	100.0
2134	18.4	7427	36.1	2199	19.7	9587	35.4	469	11.2	56	6.5	19542	100.0
3421	18.4	7427	36.1	2199	19.7	9587	35.4	469	11.2	56	6.5	19542	100.0
2134	18.4	7427	36.1	2199	19.7	9587	35.4	469	11.2	56	6.5	19542	100.0
3421	18.4	7427	36.1	2199	19.7	9587	35.4	469	11.2	56	6.5	19542	100.0
2134	18.4	7427	36.1	2199	19.7	9587	35.4	469	11.2	56	6.5	19542	100.0
3421	18.4	7427	36.1	2199	19.7	9587	35.4	469	11.2	56	6.5	19542	100.0
2134	18.4	7427	36.1	2199	19.7	9587	35.4	469	11.2	56	6.5	19542	100.0
3421	18.4	7427	36.1	2199	19.7	9587	35.4	469	11.2	56	6.5	19542	100.0
2134	18.4	7427	36.1	2199	19.7	9587	35.4	469	11.2	56	6.5	19542	100.0
3421	18.4	7427	36.1	2199	19.7	9587	35.4	469	11.2	56	6.5	19542	100.0
2134	18.4	7427	36.1	2199	19.7	9587	35.4	469	11.2	56	6.5	19542	100.0
3421	18.4	7427	36.1	2199	19.7	9587	35.4	469	11.2	56	6.5	19542	100.0

System development was financed by a grant from the National Institute of Mental Health (NIMH) and by the New York State Department of Mental Hygiene. Nine states currently use the system via remote terminals linked to the Rockland computer. Several other states have installed the system on their own equipment.

Since the computer programs were written for the IBM 370, it is almost essential that any one else installing the system have that type of equipment.

States who use the terminals pay a yearly fee based on volume of transactions. One state, with approximately 100,000 patients on file, pays approximately $100,000 per year for data processing costs.

SYSTEM OVERVIEW

The patient file is opened by an Admission Form (Exhibit 39) containing demographic and biographic data, and a problem appraisal of the patient. As services are rendered, the patient file is updated and data is also stored in a file for the facility providing the service.

Units

A "time" unit is used based upon the hours and minutes of service received by the patient. The unit is recorded each time a patient receives a service, for each type of service received, and is entered into both the patient file and the facility file, along with the clinician's identity.

The time is recorded on the Direct Patient Service Form (Exhibit 40). Examples of services that are provided are shown in Exhibit 41. However, each user may identify the services rendered by his facility and codes he wishes to use for them.

Many other types of forms may be used to record detailed diagnosis, evaluation and problem appraisal.

Data from these other forms is entered into the patient file and may be referenced by the properly authorized individuals as treatment progresses. Among some of the other data collection forms are:

- Psychiatric Diagnosis Recording Form
- Mental Status Examination Record
- Periodic Evaluation Record
- Problem Appraisal Scale
- Psychiatric Anamnestic Record

Most of the computer output produced from these forms is narrative in form.

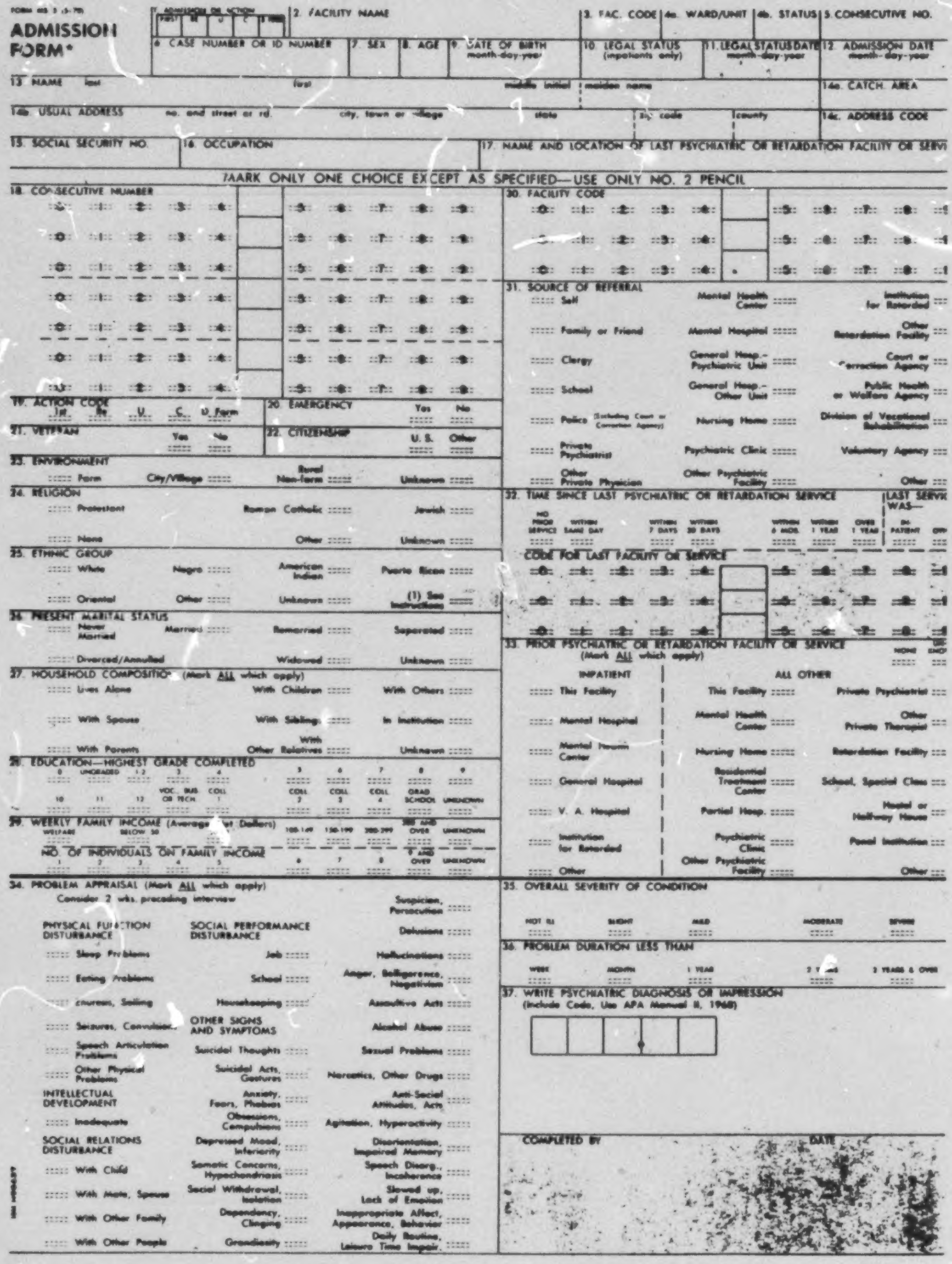
When the patient stops treatment, a Termination Form (Exhibit 42) records the disposition of the case, referrals made and final diagnosis. It also can be used to summarize the treatments given.

The system does not currently have the capacity to collect or report treatment costs.

REPORTS

The system produces various standard management and client history reports. In addition, an automated report generator feature can produce special reports based on requested parameters.

EXHIBIT 39



FORM MS 5 (5-75)

ADMISSION FORM*

1. ADMISSION OR ACTION FIRST / RE / U / C / D FORM	2. FACILITY NAME			3. FAC. CODE	4a. WARD/UNIT	4b. STATUS	5. CONSECUTIVE NO.
6. CASE NUMBER OR ID NUMBER	7. SEX	8. AGE	9. DATE OF BIRTH month-day-year	10. LEGAL STATUS (inpatients only)		11. LEGAL STATUS DATE month-day-year	12. ADMISSION DATE month-day-year
13. NAME last	first		middle initial	maiden name			14a. CATCH. AREA
14b. USUAL ADDRESS no. and street or rd.	city, town or village		state	zip code		county	14c. ADDRESS CODE
15. SOCIAL SECURITY NO.	16. OCCUPATION		17. NAME AND LOCATION OF LAST PSYCHIATRIC OR RETARDATION FACILITY OR SERVI				

MARK ONLY ONE CHOICE EXCEPT AS SPECIFIED—USE ONLY NO. 2 PENCIL

18. CONSECUTIVE NUMBER
0 1 2 3 4 ☐ 5 6 7 8 9
0 1 2 3 4 ☐ 5 6 7 8 9
0 1 2 3 4 ☐ 5 6 7 8 9
0 1 2 3 4 ☐ 5 6 7 8 9
0 1 2 3 4 ☐ 5 6 7 8 9
0 1 2 3 4 ☐ 5 6 7 8 9
0 1 2 3 4 ☐ 5 6 7 8 9

19. ACTION CODE ☐ 1st ☐ Re ☐ U ☐ C ☐ D Form

20. EMERGENCY ☐ Yes ☐ No

21. VETERAN ☐ Yes ☐ No

22. CITIZENSHIP ☐ U. S. ☐ Other

23. ENVIRONMENT
☐ Farm City/Village ☐ Rural Non-farm ☐ Unknown ☐

24. RELIGION
☐ Protestant Roman Catholic ☐ Jewish ☐
☐ None Other ☐ Unknown ☐

25. ETHNIC GROUP
☐ White Negro ☐ American Indian ☐ Puerto Rican ☐
☐ Oriental Other ☐ Unknown ☐ (1) See Instructions ☐

26. PRESENT MARITAL STATUS
☐ Never Married Married ☐ Remarried ☐ Separated ☐
☐ Divorced/Annulled Widowed ☐ Unknown ☐

27. HOUSEHOLD COMPOSITION (Mark ALL which apply)
☐ Lives Alone With Children ☐ With Others ☐
☐ With Spouse With Siblings ☐ In Institution ☐
☐ With Parents With Other Relatives ☐ Unknown ☐

28. EDUCATION—HIGHEST GRADE COMPLETED
☐ 0 ☐ UNGRADED ☐ 1-2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9
☐ 10 ☐ 11 ☐ 12 ☐ VOC. BUS. OR TECH ☐ COLL 1 ☐ COLL 2 ☐ COLL 3 ☐ COLL 4 ☐ GRAD SCHOOL ☐ UNKNOWN

29. WEEKLY FAMILY INCOME (Average Net Dollars)
☐ WELFARE ☐ BELOW 50 ☐ 50-99 ☐ 100-149 ☐ 150-199 ☐ 200-299 ☐ 300 AND OVER ☐ UNKNOWN
NO. OF INDIVIDUALS ON FAMILY INCOME
☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 AND OVER ☐ UNKNOWN

30. FACILITY CODE
0 1 2 3 4 ☐ 5 6 7 8 9
0 1 2 3 4 ☐ 5 6 7 8 9
0 1 2 3 4 ☐ 5 6 7 8 9

31. SOURCE OF REFERRAL
☐ Self Mental Health Center ☐ Institution for Retarded ☐
☐ Family or Friend Mental Hospital ☐ Other Retardation Facility ☐
☐ Clergy General Hosp.–Psychiatric Unit ☐ Court or Correction Agency ☐
☐ School General Hosp.–Other Unit ☐ Public Health or Welfare Agency ☐
☐ Police (Excluding Court or Correction Agency) Nursing Home ☐ Division of Vocational Rehabilitation ☐
☐ Private Psychiatrist Psychiatric Clinic ☐ Voluntary Agency ☐
☐ Other Private Physician Other Psychiatric Facility ☐ Other ☐

32. TIME SINCE LAST PSYCHIATRIC OR RETARDATION SERVICE
☐ NO PRIOR SERVICE ☐ WITHIN SAME DAY ☐ WITHIN 7 DAYS ☐ WITHIN 30 DAYS ☐ WITHIN 6 MOS. ☐ WITHIN 1 YEAR ☐ OVER 1 YEAR
LAST SERVIC WAS— ☐ IN-PATIENT ☐ OTH
CODE FOR LAST FACILITY OR SERVICE
0 1 2 3 4 ☐ 5 6 7 8 9
0 1 2 3 4 ☐ 5 6 7 8 9
0 1 2 3 4 ☐ 5 6 7 8 9

33. PRIOR PSYCHIATRIC OR RETARDATION FACILITY OR SERVICE (Mark ALL which apply) ☐ NONE ☐ UNKNO

INPATIENT
☐ This Facility
☐ Mental Hospital
☐ Mental Health Center
☐ General Hospital
☐ V. A. Hospital
☐ Institution for Retarded
☐ Other

ALL OTHER
This Facility ☐ Private Psychiatrist ☐
Mental Health Center ☐ Other Private Therapist ☐
Nursing Home ☐ Retardation Facility ☐
Residential Treatment Center ☐ School, Special Class ☐
Partial Hosp. ☐ Hostel or Halfway House ☐
Psychiatric Clinic ☐ Penal Institution ☐
Other Psychiatric Facility ☐ Other ☐

34. PROBLEM APPRAISAL (Mark ALL which apply)
Consider 2 wks. preceding interview

PHYSICAL FUNCTION DISTURBANCE
☐ Sleep Problems
☐ Eating Problems
☐ Enuresis, Soiling
☐ Seizures, Convulsions
☐ Speech Articulation Problems
☐ Other Physical Problems

INTELLECTUAL DEVELOPMENT
☐ Inadequate

SOCIAL RELATIONS DISTURBANCE
☐ With Child
☐ With Mate, Spouse
☐ With Other Family
☐ With Other People

SOCIAL PERFORMANCE DISTURBANCE
Job ☐
School ☐
Housekeeping ☐

OTHER SIGNS AND SYMPTOMS
Suicidal Thoughts ☐
Suicidal Acts, Gestures ☐
Anxiety, Fears, Phobias ☐
Obsessions, Compulsions ☐
Depressed Mood, Inferiority ☐
Somatic Concerns, Hypochondriasis ☐
Social Withdrawal, Isolation ☐
Dependency, Clinging ☐
Grandiosity ☐

Suspicion, Persecution ☐
Delusions ☐
Hallucinations ☐
Anger, Belligerence, Negativism ☐
Assaultive Acts ☐
Alcohol Abuse ☐
Sexual Problems ☐
Narcotics, Other Drugs ☐
Anti-Social Attitudes, Acts ☐
Agitation, Hyperactivity ☐
Disorientation, Impaired Memory ☐
Speech Disorg., Incoherence ☐
Slowed up, Lack of Emotion ☐
Inappropriate Affect, Appearance, Behavior ☐
Daily Routine, Leisure Time Impair. ☐

35. OVERALL SEVERITY OF CONDITION
☐ NOT ILL ☐ SLIGHT ☐ MILD ☐ MODERATE ☐ SEVERE

36. PROBLEM DURATION LESS THAN
☐ WEEK ☐ MONTH ☐ 1 YEAR ☐ 2 YEARS ☐ 2 YEARS & OVER

37. WRITE PSYCHIATRIC DIAGNOSIS OR IMPRESSION
(Include Code, Use APA Manual II, 1968)

☐☐☐.☐☐

COMPLETED BY DATE

Admission Form

EXHIBIT 40

MSIS DIRECT PATIENT SERVICE FORM

PATIENT NAME	CONSECUTIVE NUMBER	UNIT RENDERING SERVICE
CONTACT CLINICIAN	OTHER CLINICIAN	

CONSECUTIVE NUMBER

:0:	:1:	:2:	:3:	:4:	☐	:5:	:6:	:7:	:8:	:9:
:0:	:1:	:2:	:3:	:4:	☐	:5:	:6:	:7:	:8:	:9:
:0:	:1:	:2:	:3:	:4:	☐	:5:	:6:	:7:	:8:	:9:
:0:	:1:	:2:	:3:	:4:	☐	:5:	:6:	:7:	:8:	:9:
:0:	:1:	:2:	:3:	:4:	☐	:5:	:6:	:7:	:8:	:9:
:0:	:1:	:2:	:3:	:4:	☐	:5:	:6:	:7:	:8:	:9:
:0:	:1:	:2:	:3:	:4:	☐	:5:	:6:	:7:	:8:	:9:

ACTION CODE

::::: NEW DELETE :::::

APPOINTMENT TYPE

::::: SCHEDULED UNSCHEDULED :::::

CANCELLATION

PATIENT CANCELLED :::::	CLINICIAN CANCELLED :::::	NOT KEPT NOT CANCELLED :::::

MANNER OF CONTACT

IN FACILITY :::::	IN FIELD :::::	TELEPHONE :::::

EMERGENCY

::::: EMERGENCY NON-EMERGENCY :::::

TYPE OF SERVICE (1)

:0:	:1:	:2:	:3:	:4:	☐	:5:	:6:	:7:	:8:	:9:
:0:	:1:	:2:	:3:	:4:	☐	:5:	:6:	:7:	:8:	:9:
:0:	:1:	:2:	:3:	:4:	☐	:5:	:6:	:7:	:8:	:9:

TYPE OF SERVICE (2)

:0:	:1:	:2:	:3:	:4:	☐	:5:	:6:	:7:	:8:	:9:
:0:	:1:	:2:	:3:	:4:	☐	:5:	:6:	:7:	:8:	:9:
:0:	:1:	:2:	:3:	:4:	☐	:5:	:6:	:7:	:8:	:9:

PERSON(S) SEEN (mark ALL which apply)

::::: PATIENT SPOUSE ::::: PARENT :::::

::::: OTHER MEMBER OF PATIENT'S FAMILY OTHER :::::

NUMBER OF PATIENTS SEEN

:0:	:1:	:2:	:3:	:4:	☐	:5:	:6:	:7:	:8:	:9:
:0:	:1:	:2:	:3:	:4:	☐	:5:	:6:	:7:	:8:	:9:

NUMBER OF NON-PATIENTS SEEN

:0:	:1:	:2:	:3:	:4:	☐	:5:	:6:	:7:	:8:	:9:
:0:	:1:	:2:	:3:	:4:	☐	:5:	:6:	:7:	:8:	:9:

FACILITY CODE

:0:	:1:	:2:	:3:	:4:	☐	:5:	:6:	:7:	:8:	:9:
:0:	:1:	:2:	:3:	:4:	☐	:5:	:6:	:7:	:8:	:9:
:0:	:1:	:2:	:3:	:4:	☐	:5:	:6:	:7:	:8:	:9:

UNIT RENDERING SERVICE

:0:	:1:	:2:	:3:	:4:	☐	:5:	:6:	:7:	:8:	:9:
:0:	:1:	:2:	:3:	:4:	☐	:5:	:6:	:7:	:8:	:9:
:0:	:1:	:2:	:3:	:4:	☐	:5:	:6:	:7:	:8:	:9:

DATE OF CONTACT

JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEPT	OC
:1:	:71:	:72:	:73:	:74:	:75:	:76:	:77:	NOV	DE
:2:	:3:	:4:	:5:	:6:	:7:	:8:	:9:	:10:	:11:
:12:	:13:	:14:	:15:	:16:	:17:	:18:	:19:	:20:	:21
:22:	:23:	:24:	:25:	:26:	:27:	:28:	:29:	:30:	:31

TIME SPENT (minutes)

:0:	:1:	:2:	:3:	:4:	☐	:5:	:6:	:7:	:8:	:9
:0:	:1:	:2:	:3:	:4:	☐	:5:	:6:	:7:	:8:	:9
:0:	:1:	:2:	:3:	:4:	☐	:5:	:6:	:7:	:8:	:9

GROUP NUMBER

:0:	:1:	:2:	:3:	:4:	☐	:5:	:6:	:7:	:8:	:9
:0:	:1:	:2:	:3:	:4:	☐	:5:	:6:	:7:	:8:	:9
:0:	:1:	:2:	:3:	:4:	☐	:5:	:6:	:7:	:8:	:9

INTENDED DISPOSITION (mark ALL which apply)

DISCONTINUE SERVICE :::::	REFER :::::	HOL :::::

UNIT REFERRED TO

:0:	:1:	:2:	:3:	:4:	☐	:5:	:6:	:7:	:8:	:9
:0:	:1:	:2:	:3:	:4:	☐	:5:	:6:	:7:	:8:	:9
:0:	:1:	:2:	:3:	:4:	☐	:5:	:6:	:7:	:8:	:9

CONTACT CLINICIAN

:0:	:1:	:2:	:3:	:4:	☐	:5:	:6:	:7:	:8:	:9
:0:	:1:	:2:	:3:	:4:	☐	:5:	:6:	:7:	:8:	:9
:0:	:1:	:2:	:3:	:4:	☐	:5:	:6:	:7:	:8:	:9

OTHER CLINICIAN

:0:	:1:	:2:	:3:	:4:	☐	:5:	:6:	:7:	:8:	:9
:0:	:1:	:2:	:3:	:4:	☐	:5:	:6:	:7:	:8:	:9
:0:	:1:	:2:	:3:	:4:	☐	:5:	:6:	:7:	:8:	:9

Direct Patient Services Form

EXHIBIT 41

MSIS DIRECT PATIENT SERVICE SYSTEM
Type of Service Code

A. CONTACT SERVICES

01—Contact Interview
09—Other

B. EVALUATION SERVICES

10—Psychiatric Evaluation
11—Social Evaluation
12—Psychological Evaluation
13—Combination of the Above Three
14—Physical Evaluation
15—Neurological Evaluation
16—Speech Evaluation
17—Hearing Evaluation
18—Educational Evaluation
19—Vocational Evaluation
20—Retardation Client Evaluation
29—Other

C. TREATMENT SERVICES

30—Individual Therapy
31—Group Therapy
32—Child Therapy
33—Family Therapy
34—Couple Therapy
35—Collateral Therapy
36—Crisis Intervention
37—Medication (Chemotherapy)
38—Detoxification
39—Somatic Therapy
40—Other Medical-Surgical Services
41—Activity Therapy
42—Social Support Services
43—Behavior Therapy
49—Other

D. REHABILITATION-RESTORATION-HABILITATION SERVICES

50—Vocational Rehabilitation/Counseling
51—Social Rehabilitation Services
52—Speech and Hearing Therapy
53—Special Educational Services
54—Sheltered Workshop
55—Behavioral Modification
56—Home Visit Service
57—Pre-vocational Services
58—Recreational Service/Activity
59—Other Counseling
69—Other

E. CLIENT RELATED ACTIVITIES

70—Preparation
71—Report Writing
72—Form Service
73—Information Gathering Activities
74—Patient/Client Related Conferences and Meetings
75—Court Testimony
76—Field Services
79—Other

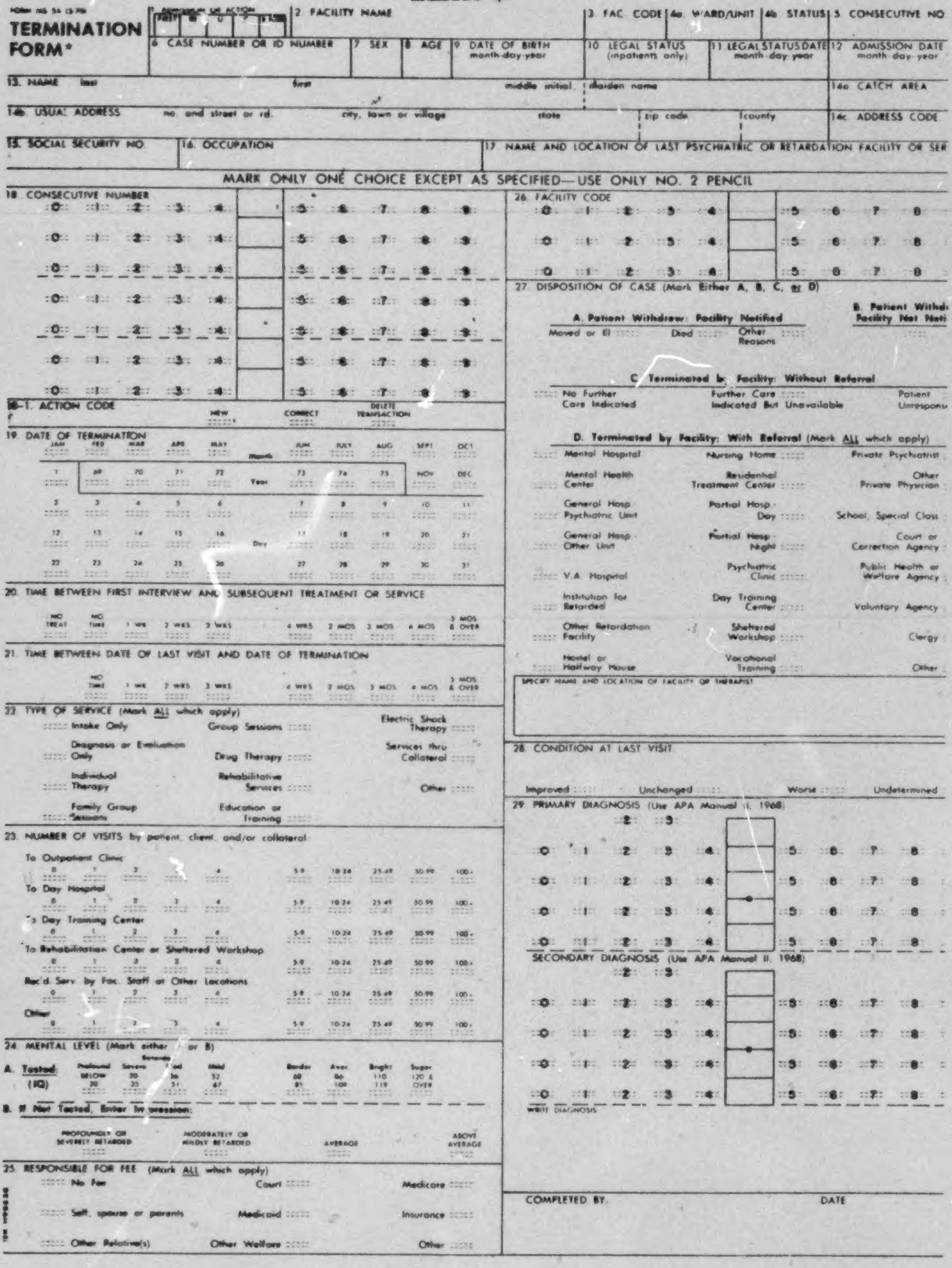
F. RESIDENTIAL CARE SERVICES

80—Personal Care
81—Half-way House
82—Foster Care
89—Other

G. HOSPITALIZATION-PARTIAL HOSPITALIZATION

90—Inpatient
91—Day Treatment
92—Night Hospital
93—Ward Government
94—Child Care/Day Care
95—Therapeutic Nursery School
99—Other

EXHIBIT 42



TERMINATION FORM*

1 [illegible] | 2 FACILITY NAME | 3 FAC. CODE | 4a WARD/UNIT | 4b STATUS | 5 CONSECUTIVE NO

6 CASE NUMBER OR ID NUMBER | 7 SEX | 8 AGE | 9 DATE OF BIRTH month-day-year | 10 LEGAL STATUS (inpatients only) | 11 LEGAL STATUS DATE month-day-year | 12 ADMISSION DATE month-day-year

13. NAME last | first | middle initial | maiden name | 14a CATCH AREA

14b. USUAL ADDRESS no. and street or rd. | city, town or village | state | zip code | county | 14c ADDRESS CODE

15. SOCIAL SECURITY NO. | 16. OCCUPATION | 17 NAME AND LOCATION OF LAST PSYCHIATRIC OR RETARDATION FACILITY OR SER

MARK ONLY ONE CHOICE EXCEPT AS SPECIFIED—USE ONLY NO. 2 PENCIL

18 CONSECUTIVE NUMBER

0 1 2 3 4 ☐ 5 6 7 8 9
0 1 2 3 4 ☐ 5 6 7 8 9
0 1 2 3 4 ☐ 5 6 7 8 9
0 1 2 3 4 ☐ 5 6 7 8 9
0 1 2 3 4 ☐ 5 6 7 8 9
0 1 2 3 4 ☐ 5 6 7 8 9
0 1 2 3 4 ☐ 5 6 7 8 9

18-1. ACTION CODE

NEW ☐ CORRECT ☐ DELETE TRANSACTION ☐

19. DATE OF TERMINATION

JAN ☐	FEB ☐	MAR ☐	APR ☐	MAY ☐	Month	JUN ☐	JULY ☐	AUG ☐	SEPT ☐	OCT ☐
1 ☐	69 ☐	70 ☐	71 ☐	72 ☐	Year	73 ☐	74 ☐	75 ☐	NOV ☐	DEC ☐
2 ☐	3 ☐	4 ☐	5 ☐	6 ☐		7 ☐	8 ☐	9 ☐	10 ☐	11 ☐
12 ☐	13 ☐	14 ☐	15 ☐	16 ☐	Day	17 ☐	18 ☐	19 ☐	20 ☐	21 ☐
22 ☐	23 ☐	24 ☐	25 ☐	26 ☐		27 ☐	28 ☐	29 ☐	30 ☐	31 ☐

20. TIME BETWEEN FIRST INTERVIEW AND SUBSEQUENT TREATMENT OR SERVICE

NO TREAT ☐ NO TIME ☐ 1 WK ☐ 2 WKS ☐ 3 WKS ☐ 4 WKS ☐ 2 MOS ☐ 3 MOS ☐ 4 MOS ☐ 5 MOS & OVER ☐

21. TIME BETWEEN DATE OF LAST VISIT AND DATE OF TERMINATION

NO TIME ☐ 1 WK ☐ 2 WKS ☐ 3 WKS ☐ 4 WKS ☐ 2 MOS ☐ 3 MOS ☐ 4 MOS ☐ 5 MOS & OVER ☐

22. TYPE OF SERVICE (Mark ALL which apply)

☐ Intake Only
☐ Diagnosis or Evaluation Only
☐ Individual Therapy
☐ Family Group Sessions
Group Sessions ☐
Drug Therapy ☐
Rehabilitative Services ☐
Education or Training ☐
Electric Shock Therapy ☐
Services thru Collateral ☐
Other ☐

23. NUMBER OF VISITS by patient, client, and/or collateral

To Outpatient Clinic									
0 ☐	1 ☐	2 ☐	3 ☐	4 ☐	5-9 ☐	10-24 ☐	25-49 ☐	50-99 ☐	100+ ☐
To Day Hospital									
0 ☐	1 ☐	2 ☐	3 ☐	4 ☐	5-9 ☐	10-24 ☐	25-49 ☐	50-99 ☐	100+ ☐
To Day Training Center									
0 ☐	1 ☐	2 ☐	3 ☐	4 ☐	5-9 ☐	10-24 ☐	25-49 ☐	50-99 ☐	100+ ☐
To Rehabilitation Center or Sheltered Workshop									
0 ☐	1 ☐	2 ☐	3 ☐	4 ☐	5-9 ☐	10-24 ☐	25-49 ☐	50-99 ☐	100+ ☐
Rec'd. Serv. by Fac. Staff at Other Locations									
0 ☐	1 ☐	2 ☐	3 ☐	4 ☐	5-9 ☐	10-24 ☐	25-49 ☐	50-99 ☐	100+ ☐
Other									
0 ☐	1 ☐	2 ☐	3 ☐	4 ☐	5-9 ☐	10-24 ☐	25-49 ☐	50-99 ☐	100+ ☐

24. MENTAL LEVEL (Mark either A or B)

A. Tested: (IQ)

Profound	Retarded Severe	Retarded Mod	Retarded Mild	Border	Aver	Bright	Super
BELOW 20 ☐	20 35 ☐	36 51 ☐	52 67 ☐	68 85 ☐	86 109 ☐	110 119 ☐	120 & OVER ☐

B. If Not Tested, Enter Impression:

PROFOUNDLY OR SEVERELY RETARDED ☐ MODERATELY OR MILDLY RETARDED ☐ AVERAGE ☐ ABOVE AVERAGE ☐

25. RESPONSIBLE FOR FEE (Mark ALL which apply)

☐ No Fee
☐ Self, spouse or parents
☐ Other Relative(s)
Court ☐
Medicaid ☐
Other Welfare ☐
Medicare ☐
Insurance ☐
Other ☐

26. FACILITY CODE

0 1 2 3 4 ☐ 5 6 7 8
0 1 2 3 4 ☐ 5 6 7 8
0 1 2 3 4 ☐ 5 6 7 8

27. DISPOSITION OF CASE (Mark Either A, B, C, or D)

A. Patient Withdrew: Facility Notified

Moved or Ill ☐ Died ☐ Other Reasons ☐

B. Patient Withd
Facility Not Noti
☐

C. Terminated by Facility: Without Referral

☐ No Further Care Indicated
Further Care Indicated But Unavailable ☐
Patient Unrespons

D. Terminated by Facility: With Referral (Mark ALL which apply)

☐ Mental Hospital
☐ Mental Health Center
☐ General Hosp. Psychiatric Unit
☐ General Hosp. Other Unit
☐ V.A. Hospital
☐ Institution for Retarded
☐ Other Retardation Facility
☐ Hostel or Halfway House
Nursing Home ☐
Residential Treatment Center ☐
Partial Hosp. Day ☐
Partial Hosp. Night ☐
Psychiatric Clinic ☐
Day Training Center ☐
Sheltered Workshop ☐
Vocational Training ☐
Private Psychiatrist
Other Private Physician
School, Special Class
Court or Correction Agency
Public Health or Welfare Agency
Voluntary Agency
Clergy
Other

SPECIFY NAME AND LOCATION OF FACILITY OR THERAPIST

28. CONDITION AT LAST VISIT

Improved ☐ Unchanged ☐ Worse ☐ Undetermined

29. PRIMARY DIAGNOSIS (Use APA Manual II, 1968)

2 3
0 1 2 3 4 ☐ 5 6 7 8
0 1 2 3 4 ☐ 5 6 7 8
0 1 2 3 4 ☐ 5 6 7 8
0 1 2 3 4 ☐ 5 6 7 8

SECONDARY DIAGNOSIS (Use APA Manual II, 1968)

2 3
0 1 2 3 4 ☐ 5 6 7 8
0 1 2 3 4 ☐ 5 6 7 8
0 1 2 3 4 ☐ 5 6 7 8
0 1 2 3 4 ☐ 5 6 7 8

WRITE DIAGNOSIS

COMPLETED BY | DATE

Termination Form

One patient history report shows patient personal data, presenting problems and treatment history. Another lists, for each individual, the types of service, dates, hours and minutes of service received and the unit providing services.

Management reports show accumulated hours of service by service type and staff person and number of contacts by staff person for a particular facility. There are also reports on indirect service time spent by facility staff. (See Appendix F for samples of these reports.)

FUTURE PLANS

Billing capability is a requirement of most Mental Health facilities, since many of their patients do not receive Medicare or Medicaid. Therefore, the system developers are planning to design a patient billing apparatus to link costs with the existing system.

PROTECTION OF CONFIDENTIALITY

It is difficult to discuss any kind of information system in the Mental Health field without addressing the issue of confidentiality. The reluctance to disclose information on the services and the units of service received by a client to individuals or organizations outside the facility providing the service is the subject of considerable controversy, both for Mental Health programs and for those Title XX Social Service programs that include Mental Health services.

The provider facility may feel that such disclosure violates the security of the professional/client relationship. Skeptics counter that such a position is a smoke-screen to protect poorly managed facilities.

The Nebraska Department of Public Institutions (DPI) has introduced an innovation that seems to have somewhat ameliorated the problem. Nebraska is one of the states implementing the MSIS, although electing to process the data on a compatible state computer.

The MSIS patient identifier is a seven-digit number which can be any number that the user chooses to input. No other identifying data is required. Strict controls limit access to the data to only the originating organizations.

Because of reservations voiced by local Mental Health providers, a coding system was devised using selected letters from the patient's name, digits from the birthdate, and a code for gender. These digits are scrambled by the director of the local Mental Health facility so that once the data leaves that facility it is not known to anyone, except that person. Since all facilities use the same coding process, a central file can be maintained by DPI without knowledge of the client's name.

Nebraska has instituted several other security measures described in a document entitled "A Client Coding System for Maintaining Confidentiality in a Mental Health Information System" (see bibliography for citation).

UNIT-OF-SERVICE RESEARCH PROJECTS

NEW YORK STATE UNIT OF SERVICE COST PROJECT

The unit of service project in New York is one of two research projects sponsored by HEW/SRS on units of service. This particular experiment is being conducted by the Welfare Research, Inc. (WRI), a non-profit research corporation established by the Department of Social Services in New York State for the purpose of carrying out innovative experiments in the human service field

BACKGROUND

New York has had considerable experience in information systems for social services over the past two years. The 'GOSS' (Goal Oriented Social Services) system, that resulted from the HEW/SRS sponsored Booz-Allen feasibility study entitled "Social Service Effectiveness—an Analysis of Barriers to Self-Sufficiency," provided the basis for New York's Social Service Information System—SSIS, initiated in 1972.

The New York system was exemplary in at least one respect—all of the basic information to be included in both establishing client information and updating were derived from one form (see Exhibit 43).

Unfortunately, the SSIS encountered most of the pitfalls experienced by other states who have more recently launched system designed efforts in response to the new Title XX requirements. While this paper does not propose to discuss the pros and cons of human services information systems in general, we hope to alert service unit system design to the problems experienced by New York and other states. The Conclusions and Recommendations (Section V) of this paper list the "Canons" which provide more detail on the proper approach to human service information system development. The New York original SSIS system provided ample evidence of the viability of these canons.

As can be seen from the SSIS basic input document, the original design included service units measured in either hours or days. The guidelines for actually recording the units were imprecise and further complicated by the overlapping and generalities of the pre-Title XX social service definitions. Very few workers, if any, had had experience using units or thinking of their work in terms of units. Having this requirement thrust suddenly upon them understandably caused much confusion and adverse reaction.

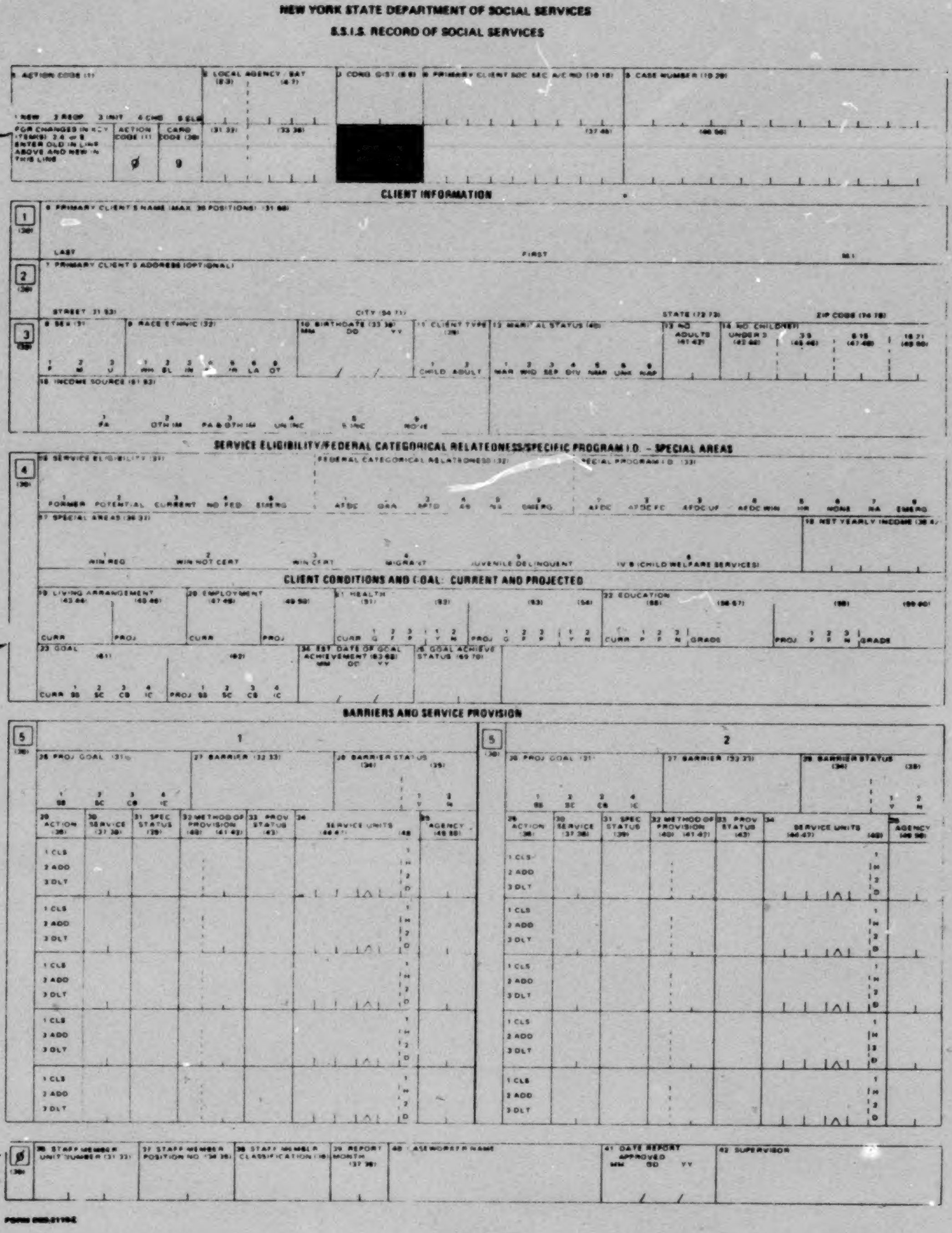
Although the unit of service information was aggregated at the state level and some reports were produced, no real effort was expended to analyze the utility of the unit as a decision making or service delivery tool prior to the final demise of the SSIS system in mid-1975.

PROJECT OVERVIEW

With the advent of Title XX in October of 1975, 17 services were defined for inclusion in the New York State Comprehensive Annual Social Services program plan. Welfare Research, Inc. is using these services, as modified by the second year Title XX plan, as a basis for the unit of service research project. The experiment will hopefully avoid most of the problems encountered by SSIS.

Since the new Social Service Reporting System in New York (SSRS) that replaces the SSIS is basically a State reporting system, as opposed to a localized client tracking system, the WRI unit of service test will be carried out at the county level, using data generated from county service delivery activity. State program and systems people will participate in a review

EXHIBIT 43



NEW YORK STATE DEPARTMENT OF SOCIAL SERVICES

S.S.I.S. RECORD OF SOCIAL SERVICES

1 ACTION CODE (1) — 1 NEW 2 REOP 3 INIT 4 CHG 5 CLS

2 LOCAL AGENCY / SAT (2-3) (4-7)

3 COND. DIST (8-9)

4 PRIMARY CLIENT SOC. SEC. A/C NO. (10-18)

5 CASE NUMBER (19-29)

FOR CHANGES IN KEY ITEM(S) 2, 4 or 5 ENTER OLD IN LINE ABOVE AND NEW IN THIS LINE — ACTION CODE (1) Ø — CARD CODE (30) 9

CLIENT INFORMATION

1 — 6 PRIMARY CLIENT'S NAME (MAX. 30 POSITIONS) (31-60) — LAST, FIRST, M.I.

2 — 7 PRIMARY CLIENT'S ADDRESS (OPTIONAL) — STREET (31-53), CITY (54-71), STATE (72-73), ZIP CODE (74-78)

3 — 8 SEX (31): 1 F, 2 M, 3 U — 9 RACE ETHNIC (32): 1 WH, 2 BL, 3 IN, 4, 5 PR, 6 LA, 9 OT — 10 BIRTHDATE (33-38) MM DD YY — 11 CLIENT TYPE (39): 1 CHILD, 2 ADULT — 12 MARITAL STATUS (40): 1 MAR, 2 WID, 3 SEP, 4 DIV, 5 NMR, 6 UNK, 9 NAP — 13 NO. ADULTS (41-42) — 14 NO. CHILDREN: UNDER 3 (43-44), 3-5 (45-46), 6-15 (47-48), 16-21 (49-50)

15 INCOME SOURCE (51-52): 1 PA, 2 OTH IM, 3 PA & OTH IM, 4 UN INC, 5 S INC, 9 NONE

SERVICE ELIGIBILITY/FEDERAL CATEGORICAL RELATEDNESS/SPECIFIC PROGRAM I.D. – SPECIAL AREAS

4 — 16 SERVICE ELIGIBILITY (31): 1 FORMER, 2 POTENTIAL, 3 CURRENT, 4 NO FED, 5 EMERG — FEDERAL CATEGORICAL RELATEDNESS (32): AFDC, GRA, APTD, AB, AA, EMERG — SPECIAL PROGRAM I.D. (33): AFDC, AFDC FC, AFDC UF, AFDC WIN, IM, NONE, NA, EMERG

17 SPECIAL AREAS (34-37): 1 WIN REG, 2 WIN NOT CERT, 3 WIN CERT, 4 MIGRANT, 5 JUVENILE DELINQUENT, 6 IV B (CHILD WELFARE SERVICES)

18 NET YEARLY INCOME

CLIENT CONDITIONS AND GOAL: CURRENT AND PROJECTED

19 LIVING ARRANGEMENT (43-44) CURR, (45-46) PROJ — 20 EMPLOYMENT (47-48) CURR, (49-50) PROJ — 21 HEALTH (51) CURR 1 G 2 F 3 P, (52) 1 Y 2 N, (53) PROJ 1 G 2 F 3 P, (54) 1 Y 2 N — 22 EDUCATION (55) CURR 1 P 2 F 3 N, (56-57) GRADE, (58) PROJ 1 P 2 F 3 N, (59-60) GRADE

23 GOAL (61) CURR 1 SS 2 SC 3 CB 4 IC, (62) PROJ 1 SS 2 SC 3 CB 4 IC — 24 EST. DATE OF GOAL ACHIEVEMENT (63-68) MM DD YY — 25 GOAL ACHIEVE STATUS (69-70)

BARRIERS AND SERVICE PROVISION

5 — 1 / 5 — 2

26 PROJ GOAL (31): 1 SS, 2 SC, 3 CB, 4 IC — 27 BARRIER (32-33) — 28 BARRIER STATUS (34) (35): 1 Y, 2 N

29 ACTION (36) — 30 SERVICE (37-38) — 31 SPEC STATUS (39) — 32 METHOD OF PROVISION (40) (41-42) — 33 PROV STATUS (43) — 34 SERVICE UNITS (44-47) (48) — 35 AGENCY (49-50)

1 CLS, 2 ADD, 3 DLT

Ø — 36 STAFF MEMBER UNIT NUMBER (31-33) — 37 STAFF MEMBER POSITION NO. (34-36) — 38 STAFF MEMBER CLASSIFICATION (36) — 39 REPORT MONTH (37-38) — 40 CASEWORKER NAME — 41 DATE REPORT APPROVED MM DD YY — 42 SUPERVISOR

115

capacity, but WRI will do the system design in close cooperation with three counties participating in the system test.

The project began with a literature search to determine the state-of-the-art in the unit-of-service development. This phase was completed in February 1976. An analysis by WRI of these past efforts provided the basis for Phase II of the project—defining the units of service and the general system design. Those projects that contributed heavily to WRI's approach were the Louisville Services Integration Project, heavily underwritten as an HEW 'SITO' (Services Integration Targets of Opportunity) project, the Booz-Allen experiment, UWASIS, and work privately sponsored by the Family Service Association of America. Exhibit 44 illustrates a comparative analysis of one service that resulted in the service unit definitions to be tested during Phase III.

Current planning calls for the testing of at least three different approaches to the unit of service system design, probably in three different counties. While the criteria for designing each approach is not yet completed, such factors as complexity, utility, ease of gathering data, cost of processing, and potential for other counties to use the system will weigh heavily in the selection process.

Phase IV of the project will involve a written analysis of the approaches, with accompanying description and recommendations to HEW for use in other states.

The New York State Department of Social Service will also be closely observing the project for possible applications in other New York social service districts.

THE NEW YORK UNITS

WRI has elected to use a two-pronged approach to unit definition—a 'planning' unit and a 'product' unit. The planning unit applies to those things that go into the providing of a service, while the product unit is a measure of the intended results of the service. (Appendix G.)

Planning Unit

After considering both the time basis (an hour, a day), and activity basis (a session, a meeting) for the planning unit, the former was selected because hours of direct worker time for activities like sessions or meetings will vary considerably and to cost out the unit, the worker time would have to be collected anyway. (This lesson, learned on the Orange County project, has provided guidance to the New York project.)

The planning unit was also viewed from the standpoint of whether a county worker provided the service or the service was purchased from a private provider. In New York, the bulk of the county worker activity is expended in "assessing the need for, arranging for and evaluating the effect of" services. The actual provisioning of the services is done mostly through purchase agreement or by an agency other than the Title XX agency.

Whether the planning unit will be recorded as that delivered by a worker or received by a client or both has not yet been determined. Both possibilities will likely be explored during the county tests.

EXHIBIT 44

HOMEMAKER SERVICES

- *assessing* need for
- *arranging* for
- *providing*
- *evaluating*

} provision of personal care and home management, etc.

UNITS OF SERVICE

UWASIS	LOUISVILLE	BOOZE-ALLEN ETC.	
Home Health Care Homemaker Service • number of households served in a year • number of persons served in a year by age, sex, ethnic origin and family income level • number of homemaker days in a year • number of home health care provided in a year	(C) • number of hours a day, week or month of homemaker service obtained • duration of service • cost of service (P) • number of consumers served (C) – consumer units (P) – program products	• one hour of service • one arrangement of service	• numbe in hom during

EXHIBIT 44

VICES

or } **provision of personal care and home management, etc.**

UNITS OF SERVICE

	LOUISVILLE	BOOZE-ALLEN ETC.	FSAA
d in a year a year by mily in a year provided in	(C) • number of hours a day, week or month of homemaker service obtained • duration of service • cost of service (P) • number of consumers served	• one hour of service • one arrangement of service	• number of hours spent in home by homemakers during the year

(C) = consumer units

(P) = program products

EXHIBIT 45

FORM DSS-2171 (REV. 10/75)

RANDOM MOMENT OBSERVATION FORM

STATE OF NEW YORK

DEPARTMENT OF SOCIAL SERVICES

LOCAL AGENCY CODE NUMBER

SATELLITE (SITE) NUMBER

CASE NUMBER

SERVICE WORKER'S NAME

WORKER'S I.D. NUMBER

DATE Mo. Day Yr.

TIME

INSTRUCTIONS: 1) Select from Section A the action which best describes the worker's activity at the time indicated above.

2) Complete Sections B, C, D, and E only for Section A, Items 1 and 2.

3) Do not check more than one box in any Section.

SECTION A - ACTIVITY

Direct Services

01 ☐ Service Related Activity
02 ☐ Information and Referral
03 ☐ Group Services

Home Finding

09 ☐ Day Care
10 ☐ Adoption
11 ☐ Foster Care - Adults
12 ☐ Foster Care - Children

Indirect Services/Administration

04 ☐ Training
05 ☐ Meetings
06 ☐ Authorized Leave
07 ☐ Lunch Break
08 ☐ Other (includes coffee breaks)

COMPLETE THE FOLLOWING SECTIONS ONLY FOR ITEMS 1 OR 2 ABOVE

SECTION B - SERVICES

01 ☐ Adoption Services
02 ☐ Day Care - Children
03 ☐ Educational
04 ☐ Employment
05 ☐ Family Planning
06 ☐ Foster Care - Adults
07 ☐ Foster Care - Children
08 ☐ Health Related
09 ☐ Home Management
10 ☐ Homemaker - MA
11 ☐ Homemaker - Other
12 ☐ Housekeeper/Chore
13 ☐ Housing Improvement Services
14 ☐ Preventive
15 ☐ Protective Services - Adults
16 ☐ Protective Services - Children
17 ☐ Social Adjustment Services
18 ☐ Social Group Services for Senior Citizens
19 ☐ Transportation
20 ☐ Unmarried Parents Services

SECTION C - CLIENT GOAL

01 ☐ Self Support
02 ☐ Self Sufficiency
03 ☐ Protection of Children & Adults
04 ☐ Community/Home Based Care
05 ☐ Institutional Care

SECTION D - CWS

Is this activity a Child Welfare Service?

01 ☐ Yes 02 ☐ No

SECTION E - CLIENT STATUS

01 ☐ EAF
02 ☐ ADC-WIN
03 ☐ ADC-FC
04 ☐ ADC
05 ☐ SSI-Aged
06 ☐ SSI-Blind
07 ☐ SSI-Disabled
08 ☐ MA-FP
09 ☐ HR
10 ☐ Income Eligible
11 ☐ Without Regard to Income
12 ☐ FNP
13 ☐ Non-Reimbursable

☐ Posted on Daily Control Log

Initials ______________ Date ______________

Product Units

The product unit attempts to measure service goals in more precise terms than accomplishment of one of the five national goals required by Title XX.

While measuring service effectiveness in achieving these goals is important to the broader concern of Congress and State administrations, that same data is of little use to the county administrator and case worker in day-to-day agency operations.

Some of the traditional services have implicit results or 'products':

Adoption—one completed adoption
Protective Services—one child "protected."

Results for other services are not as clearly agreed upon:

Day Care	—Is it to allow the parent to seek work or obtain training, resulting in one employed parent? or does the outcome have anything to do with a change in condition of the child?
Homemaker	—Is it for care of children so that the parent can get medical treatment? or so that he or she can receive some instruction in simple household tasks?

The product unit in these cases depends on the *reason* for providing the service and is not directly linked to the end-product of the service itself (i.e., one clean house, one cared-for-child).

It can also be argued that the product unit is actually a sub-objective and should not be considered as a unit of service at all. As the project progresses some of the answers to these questions should be forthcoming. (It should be noted that most other service unit development projects have focused primarily on the planning or 'input' type of units, so that the New York project will provide valuable data as to the usefulness of the product or 'output' unit.)

UNIT COSTS

The cost system to support the unit of direct service has yet to be designed. The state currently collects costs by type of service through a Random Moment Time sampling system. (See Exhibit 45 for the data collection form.) This RMT system should provide sufficient data during the test period to determine how management use planning and product units, and whether a more detailed or totally redesigned cost system is required.

In summary, this project has some exciting possibilities and hopefully can assist the development of workable social services units.

STATE OF MISSISSIPPI UNIT OF SERVICE COST PROJECT

The Mississippi project is the second of the two HEW/SRS units of service research and demonstration projects. While the State of New York, the other grantee, has a state-supervised, county-administered delivery system, Mississippi, through its Department of Public Welfare, both supervises and administers social services delivery. The HEW/SRS sponsors hope that having two different models will aid in producing more widely applicable research results.

HISTORY

Mississippi has been active in the design and operation of social service information systems for the past two years. Their Social Service Information System (SSIS) was developed prior to Title XX, but the system was designed with sufficient flexibility so that no major problem was experienced in incorporating the new requirements. The SSIS operates through a state centralized computer system.

As clients enter the system, a service plan (Exhibit 46) is prepared indicating goal, services planned and provider information. Space is allocated on the service plan for units authorized for each service, but this column will be left blank until the research project is completed.

PROJECT OVERVIEW

The first phase of the two year project now in process is concerned with:

- Redefining the services for the forthcoming State Comprehensive Annual Services Program (CASP) Plan
- Defining the units to be used in the test
- Preparing an annotated bibliography derived from a search of service units literature
- Designing forms and procedures for collecting units and unit cost data and for identifying direct and indirect costs
- Developing procedures for reporting units.

Field testing of the units and candidate data collection forms is scheduled to begin in February, 1977 and to last six months. It will be limited to state delivered services only, i.e., no outside providers or purchased services will be included. Test evaluation is projected to begin at month four of the test phase.

RESULTS TO DATE

Since the project is in its early design phase, only limited results so far are obtainable. Initial investigations produced three types of units—all of the "input type" (See Section V for unit type description).

- Time-based units—an hour, a day
- Activity-based units—an examination, an evaluation
- Commodity units—a meal, a contraceptive device

A late status report from the State indicates that they are considering adding two other types:

- Space-based unit—a trip (not clear now how this differs from the commodity based unit)
- Need-based unit—(no specific example given but appears to be connected with medical services).

EXHIBIT 46

REVISED 8-16-74

SERVICE PLAN

•	•	•	•		
		LAST 17	FIRST 18	LAST 4	FIRST 5
CASE NUMBER 1	CM No. 2	PRIMARY CLIENT NAME		CASE HEAD AND CASE NAME	

CARE OF NAME 19	STREET, P. O. BOX, R. R. 20	CITY 21	STATE 22	ZIP CODE 23
ADDRESS				

ELIG STAT 24	INITIAL GOAL CONDITION 27	ES	LA	PS	OT	ELIG REV DATE 30	MO	DA	YR	REF SOURCE 33
EX/PAR STAT 25	CURRENT GOAL CONDITION 28	ES	LA	PS	OT	SVC PLAN REV DATE 31	MO	DA	YR	EDUC STAT 34
SVC GOAL 26	OBJECTIVE GOAL CONDITION 29	ES	LA	PS	OT	EX DATE OF ACHMT 32	MO	DA	YR	OUTCOME 35

SEQUENCE NUMBER 36	SERVICE DIRECTED To 37	SERVICE 38	SOURCE OF SERVICE 39	STATUS 40	EFFECTIVE DATE 41	AUTHORIZED TO DATE 42	UNITS 43
001		100					

OTHER WORKER IDENTIFICATION 44		WORKER IDENTIFICATION 15	•	TODAY'S DATE 16	•

EXHIBIT 47

WEEKLY REPORT
CLIENT AND COLLATERAL CONTACTS

FOR WEEK ENDING ____________________

WORKER NAME ____________________

WORKER ID NO. ____________

PRIMARY CLIENTS			SERVICE DELIVERY DATA									
CASE NUMBER	CMNO.	NAME	SVC	TIME	SVC	TIME	SVC	TIME	SVC	TIME	SVC	*TIME

EXHIBIT 47

WEEKLY REPORT
CLIENT AND COLLATERAL CONTACTS

FOR WEEK ENDING ______________

AME ______________________ WORKER ID NO. ______________________

PRIMARY CLIENTS			SERVICE DELIVERY DATA											
UMBER	CMNO	NAME	SVC	TIME	SVC	TIME	SVC	TIME	SVC	TIME	SVC	TIME	SVC	TIME

UNIT OF SERVICE SYSTEMS

An interim unit-type reporting system to obtain service provided information and costs has also been introduced (Exhibit 47). Worker time is collected in hours by type of service. Costs are then allocated based on the percentage of time spent on each service. But initial results indicate that case workers are confused as to how to record hours expended—especially those spent in "arranging" for other services—and so an alternative method of capturing this data is being considered. This new technique would lump those non-direct delivery type activities into one function or service such as Case Management. Perhaps this approach will work, but the risk is that, like their counterparts in other states, the workers will tend to record *all* of their time as Case Management. Careful controls should be established if this approach is adopted.

UNIT COSTS

After some analyses of cost accounting techniques, it has not yet been decided whether unit costs will be derived by setting a fixed "rate per unit" prior to delivery and then testing the validity of that rate or by aggregating unit data and total costs and then determining a post-delivery "cost per unit."

The Mississippi experiment, although in its early phases, has one necessary ingredient to produce a good unit of service system,—excellent technical personnel, good management, and one of the few operational social service information systems.

FUTURE DEVELOPMENT RECOMMENDATIONS FOR CONCLUSIONS AND

Given the history and underdeveloped nature of units-of-service systems as described in the previous sections, any conclusions or recommendations deserve to be read with a healthy skepticism. Nevertheless, the authors can at least enumerate much of the "what not to do's" both for the general design of human service information systems and the unit of service itself.

Some of the conclusions or "canons" are related primarily to systems design at the state level, but the many public and private project managers at the local level will be well advised to apply some of these rules to their own operations.

THE "CANONS" OF HUMAN SERVICE INFORMATION SYSTEM DESIGN

AVOID CENTRALIZED COMPUTER PROCESSING IN A STATE SUPERVISED, BUT COUNTY ADMINISTERED SERVICE DELIVERY STRUCTURE

It is difficult, if not impossible, to operate an automated system at the state level that will produce timely "turn-around" client information for a county or city administered human service program.

New York attempted this approach with their SSIS and at one time they were running over a year behind in cycling of the information back to the counties.

INVOLVE ALL POTENTIAL SYSTEM PARTICIPANTS

The people that deliver the services and provide the basic information about recipients to the system *must be involved* in the design of the system.

A "top-down" approach to design rarely succeeds. In New York the case workers actually formed a separate corporation with the purpose of doing away with the SSIS,—and they were successful.

"THINK SMALL"

Human service information systems, while not technically difficult to design, are extremely difficult to implement. The best approach is to plan a system that first meets the basic requirements and add incrementally to it. Hyper complexity has ruined many good systems designs.

"KEEP THE TECHNICAL SYSTEMS PEOPLE UNDER CONTROL OR THEY WILL DICTATE THE PURPOSE OF THE SYSTEM"

In case after case, when the reason for particularly complicated elements of a system design are questioned it can usually be traced to the "computer people." The tendency is to do the most that is technically possible, not that which is usable and affordable.

"TEST, TEST ONCE MORE AND THEN TEST AGAIN"

The tendency to rush into a design implementation, including printing of thousands of forms, prior to a good "ironing out" in the field, has too often proved to be a costly mistake. The system designer cannot anticipate all the unpredictable events that occur in the planning and delivery of human services; only through "live" testing can uncover these "surprises."

"DO NOT 'TURN-KEY' A SYSTEMS DESIGN EFFORT TO A CONSULTANT"

Too many times states have contracted for a total human service system design with little in-house participation or preparation for such an effort. When the consultant leaves, no one knows why the system was designed the way it was, no one will take responsibility for it, and upgrading or changing it is nearly impossible without calling the consultant back (and most times he is unavailable).

"SELECT CONSULTANTS BY NAME"

When using a large consulting firm, make sure *who* specifically will be working on your project. Buying a "big name" firm does not guarantee quality. Quality varies as a function of the individual who does the work.

RECOMMENDATION FOR FUTURE UNIT-OF-SERVICE SYSTEM DEVELOPMENT

INTEGRATED SYSTEMS DEVELOPMENT

RECOMMENDATION

Design statistical systems and cost systems separately, confirm that they will work, and worry about integrating the two later.

The unit links costs and services. While it may be used for other reasons, identification of a cost per unit of service is usually the primary reason for establishing such a system. Many of the systems designed to date have attempted from the start to integrate cost and units in service recipient records. Although discovering what it costs to provide services to each specific recipient is a worthy objective, this approach has not usually been successful, particularly in the early design phases.

One reason for its failure is that cost systems and systems to gather statistical information about service recipients are usually designed separately and are controlled by two different organizations. In a state department of human resources, the administrative or fiscal division is usually responsible for the cost system, while the design of the information system for social statistics is either a department of social services project or else it is shared with the systems division. Even with states which have a centralized computer or systems capability, the individuals who design the cost system and the social statistics system are often not in the same group within the department.

In the private/voluntary service delivery organization the responsibility is similarly divided and although the states' size problem is minimal in the smaller private organization, resources for designing integrated systems simply are not there.

Also, the added detail required to collect data by service units where no system previously existed is by itself a terrific burden on both the service worker and the data assimilator (key puncher) in an automated system. The excessive workload has caused many otherwise well-conceived social service information systems to fail.

Exhibit 48 is a flow diagram used by HEW/SRS to explain how a state system would function for both cost and statistics in providing Title XX response requirements. (Note the two separate files for cost and statistics.)

STATISTICAL SYSTEM DEVELOPMENT

RECOMMENDATION

Make sure the unit of service system design is useful to both supervisory and service worker personnel before implementation.

The most common approach in statistical systems design is to use the service unit for both case planning and service provisioning. In some recent cases, however, Title XX pressures have forced many organizations to use the unit for only the service provided. The unit required by Title XX reports is "a service received by a recipient one or more times during a reporting quarter." Whether the service was continuous for three months, i.e., day care, or there was a 15 minute counseling session, the service is reported as Day Care: 1 recipient, counseling: 1 recipient.

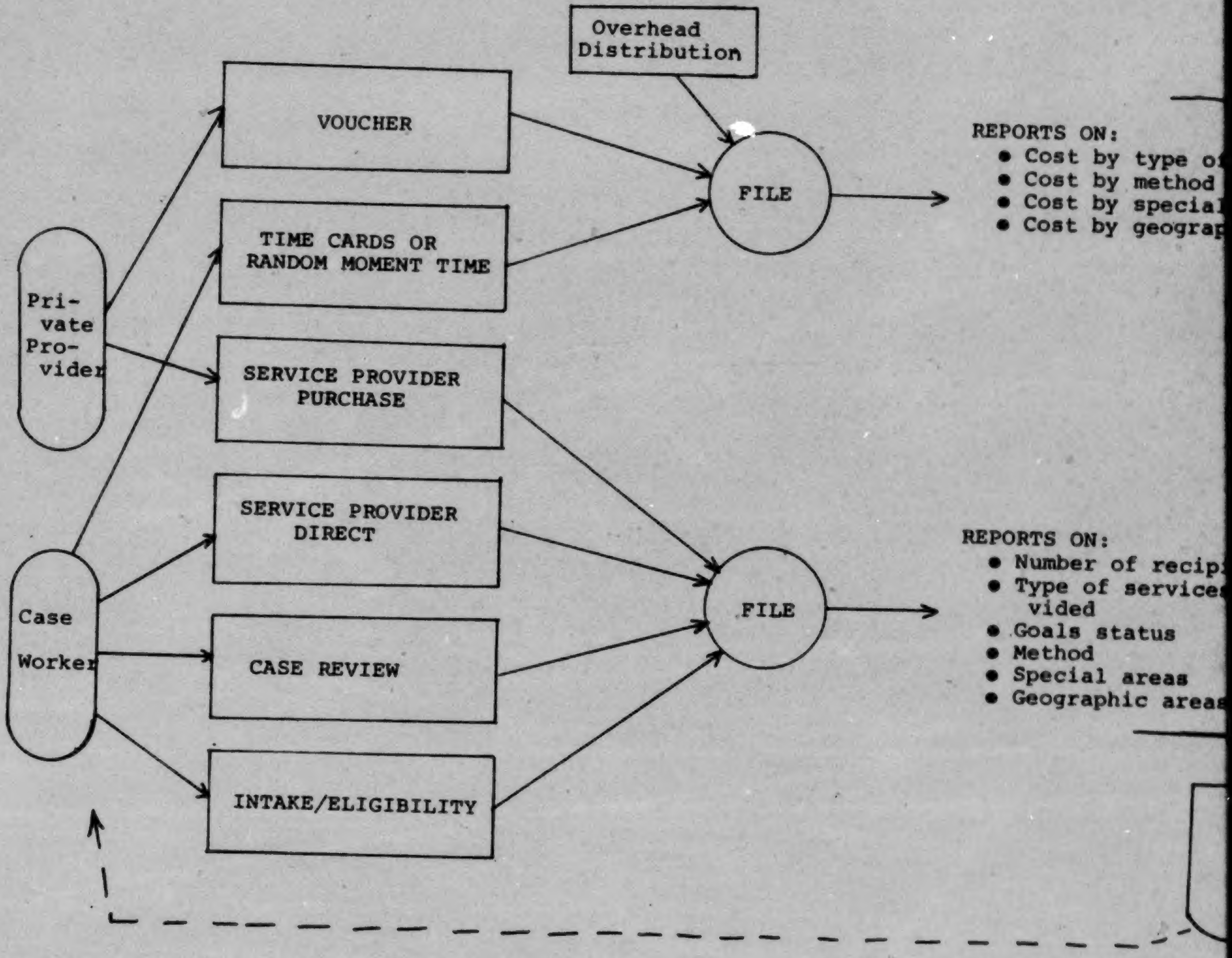
While this type of unit is useful for national and possibly state level purposes, it is not sufficiently detailed to be valuable to supervisory or case worker personnel in the service delivery organization. The units needed for their purposes must be more precise and they depend heavily on service definitions.

COST SYSTEM DEVELOPMENT

RECOMMENDATIONS

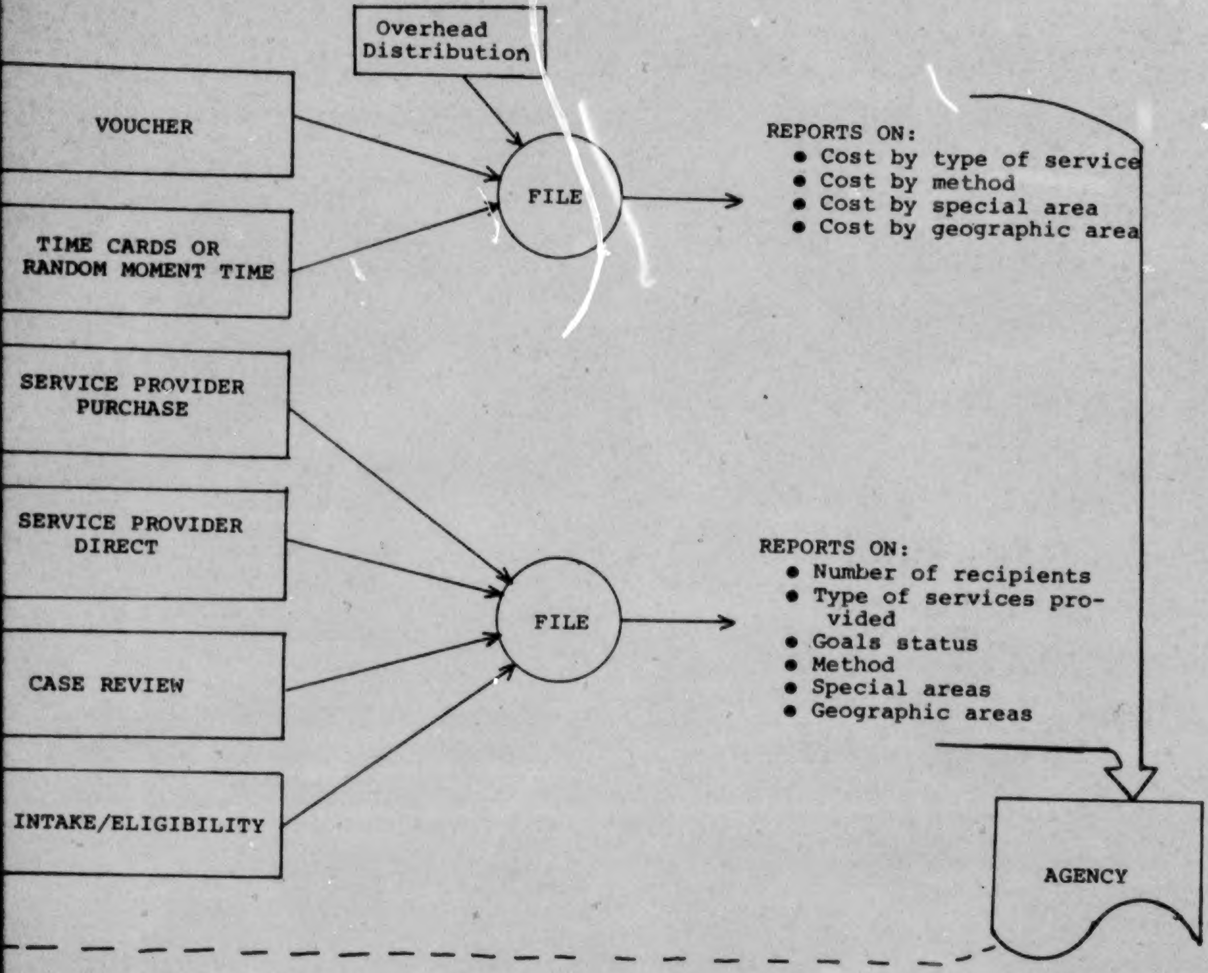
Costs should be identified as closely as possible with the specific service delivered. If an individual works on 3 services only, costs should be directed to those three, not *to all other services.*

EXHIBIT 48


Overhead Distribution
VOUCHER
TIME CARDS OR RANDOM MOMENT TIME
Pri-vate Pro-vider
SERVICE PROVIDER PURCHASE
SERVICE PROVIDER DIRECT
Case Worker
CASE REVIEW
INTAKE/ELIGIBILITY
FILE
FILE
REPORTS ON:
• Cost by type o
• Cost by method
• Cost by special
• Cost by geograp
REPORTS ON:
• Number of recip
• Type of service vided
• Goals status
• Method
• Special areas
• Geographic areas

TYPICAL COMPONENTS OF A STATE SOCIAL SERVICE INFORMATION SYSTEM

EXHIBIT 48


Overhead Distribution
VOUCHER
TIME CARDS OR RANDOM MOMENT TIME
FILE
REPORTS ON:
• Cost by type of service
• Cost by method
• Cost by special area
• Cost by geographic area
SERVICE PROVIDER PURCHASE
SERVICE PROVIDER DIRECT
CASE REVIEW
INTAKE/ELIGIBILITY
FILE
REPORTS ON:
• Number of recipients
• Type of services provided
• Goals status
• Method
• Special areas
• Geographic areas
AGENCY

TYPICAL COMPONENTS OF A STATE SOCIAL SERVICE INFORMATION SYSTEM

Case management and counseling units of service should be tied to the particular service they are directed at.

The easiest way to collect worker time for determining direct costs is by sampling.

Although this paper is not intended to discuss the issues and intricacies of cost accounting, some discussion of how cost is derived is essential to understanding the subject matter.

For a service delivery organization, costs incurred are usually of three types—direct, indirect and overhead.

Direct Cost

Direct Cost is usually composed of case worker time, and is gathered either by a time card or by some method of sampling time spent by workers. A time card is filled out by the worker at the end of the period (an hour or a day) indicating what services he or she spent their time providing.

Worker time can also be sampled by various methods to produce the same result, i.e., what service has the worker been providing.

Indirect Costs

Indirect Costs are those items that cannot be directly tied to a specific service. For purposes of this discussion, such costs would include other labor costs, such as supervisory costs, secretarial costs, support services costs, i.e., accounting personnel, systems development, and other costs of the service delivery organization, such as rent, mileage, telephone, supplies, etc.

To arrive at the total cost of delivering a service these costs must be added to the direct cost. To arrive at the costs of a *specific* service these costs must be allocated on some basis to each service delivered, usually based on the percentage of the overall cost for each service. To arrive at a unit of service cost, the specific service cost, composed of direct costs and indirect costs, is divided by the number of units provided for that specific service.

Overhead Costs

If the service delivery organization is part of a larger organization as in many state departments of human resources, the related overhead costs of the larger organization would also have to be allocated to arrive at the cost of a particular service.

If the service delivery organization is not a direct part of the larger organization, as in the case of a state or county social service department purchasing service from a private/voluntary organization, the unit cost is usually negotiated at a certain rate before services are purchased, described in a contract document, and paid for according to the agreement after services have been delivered.

As actual unit costs often deviate for one reason or another from the negotiated unit costs, the contract often contains provisions to renegotiate the rate after sufficient data has been accumulated to precisely ascertain costs. If such provisions do not exist, the vendor organization must absorb the costs, often driving up their unit costs for services not covered by the contractual agreement.

For the organization purchasing service from another organization, the costs of administering the contract and monitoring and evaluating the performance of the contractor are either allocated to the unit costs as incurred by the service delivery organization, or distributed as an item of indirect costs to units.

UNIT-OF-SERVICE DEVELOPMENT

RECOMMENDATIONS

Derive the service definition from the units of service which are components of that particular service.

Start with defining the 'time' type units; add the other types later.

Human Service organizations do not even have to implement a unit-of-service recording and reporting system to make effective use of the unit concept. A review of each service to determine its actual measurable activities (input units), and the expected measurable results (output units) can help considerably in clarifying broad and confusing service definitions.

Precise service definitions make the task of collecting unit data easier and facilitate recording of worker time. Inevitably, the time a worker spends providing the service will have to be recorded before units can be identified and defined. Basing the unit-of-service system design on this fact from the beginning, and expanding the concept as the design gains acceptance, appears to be the procedure with the most chance of success. This holds true whether the recording of unit data is oriented towards the number of hours of service received by the client, or towards the number of hours provided by the worker.

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UWASIS CHART

GOAL I. ADEQUATE INCOME AND ECONOMIC OPPORTUNITY

EMPLOYMENT SERVICES SYSTEM

Manpower Development and Training Services

Programs
Job Finding
Pre-Job Guidance
Job Training
Job Placement and Referral

Special Employment Services for the Socially, Economically, and Politically Disadvantaged

Programs
Employment Assistance to the Socially and Economically Disadvantaged
Bonding of Ex-Offenders
Exemplary Rehabilitation Certification Assistance
Certification for Employment of Non-Citizens

Special Employment Services for the Aging and the Physically and Mentally Handicapped

Programs
Sheltered Remunerative Employment
Homebound Employment

INCOME MAINTENANCE SERVICES SYSTEM

Social Insurance Services

Programs
Health Insurance for the Aged—Hospital Insurance (Medicare)
Health Insurance for the Aged—Supplementary Medical Insurance (Medicare)
Unemployment Insurance
Workmen's Compensation
Social Insurance for Railroad Workers
Special Benefits for Disabled Coal Miners ("Black Lung" Benefits)
Disability Insurance
Retirement Insurance
Survivors Insurance

Financial Aid Services

Programs
Aid to the Blind
Aid to the Permanently and Totally Disabled

GOAL II. OPTIMAL ENVIRONMENTAL CONDITIONS AND PROVISION OF BASIC MATERIAL NEEDS

FOOD AND NUTRITION SERVICES SYSTEM

Governmental Food Subvention and Assistance Services

Programs
Commodity Distribution
Food Stamps
Special Non-School Food Assistance for Children
School Breakfasts
National School Lunch Program
Special Milk Program for Children

Voluntary Food Services

Programs
General Food Service
Home Meals or Mobile Meals

CLOTHING AND APPAREL SERVICES SYSTEM

Subsidized or Free Apparel Services

Programs
Collection and Pickup of Donated Apparel
Apparel Distribution Centers

HOUSING SERVICES SYSTEM

Urban Renewal and Redevelopment Services
Programs
Real Estate Acquisition, Renewal and Redevelopment
Relocation and Allocation Under Renewal

Housing Subvention Services
Programs
Low to Moderate Income Housing Loans
Mortgage and Loan Insurance
Rent Supplements
Interest Subsidy
Public Housing
Housing Assistance for Special Groups

General Housing Search and Location Services

Programs
General Assistance for Housing Search
Residence Service

GOAL III. OPTIMAL

HEALTH (PHYSICAL) M CARE SERVICES SYSTE

Community Health Maintenance

Programs
Prevention and Control of Com
Public Health Nursing
Environmental Sanitation
Occupational Health Concerns
Community Health Education
Blood Bank
Community Clinics
Home Health Care
Medical Supplies and Equipme

Medical Care Services

Programs
Inpatient Medical Care
Outpatient Medical Care
Emergency Medical Care

MENTAL HEALTH MAIN SERVICES SYSTEM

Psychiatric Treatment Services

Programs
Inpatient Psychiatric Care
Outpatient Psychiatric Care
Emergency Psychiatric Care
Residential Treatment of the Em Disturbed
Transitional Care

Mental Health Preservation and Services

Programs
Alcoholism Prevention and Trea
Drug Abuse and Narcotics Addi and Treatment

MENTAL RETARDATION

Services for the Habilitation of Mentally Retarded

Programs
Special Day Care of the Mentall

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CES SYSTEM

Training Services

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s for the Aging and the
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CE SERVICES SYSTEM

d—Hospital

d—Supplementary
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d Workers
d Coal Miners

Totally Disabled

GOAL II. OPTIMAL ENVIRONMENTAL CONDITIONS AND PROVISION OF BASIC MATERIAL NEEDS

FOOD AND NUTRITION SERVICES SYSTEM

Governmental Food Subvention and Assistance Services

Programs
Commodity Distribution
Food Stamps
Special Non-School Food Assistance for Children
School Breakfasts
National School Lunch Program
Special Milk Program for Children

Voluntary Food Services

Programs
General Food Service
Home Meals or Mobile Meals

CLOTHING AND APPAREL SERVICES SYSTEM

Subsidized or Free Apparel Services

Programs
Collection and Pickup of Donated Apparel
Apparel Distribution Centers

HOUSING SERVICES SYSTEM

Urban Renewal and Redevelopment Services
Programs
Real Estate Acquisition, Renewal and Redevelopment
Relocation and Allocation Under Renewal

Housing Subvention Services
Programs
Low to Moderate Income Housing Loans
Mortgage and Loan Insurance
Rent Supplements
Interest Subsidy
Public Housing
Housing Assistance for Special Groups

General Housing Search and Location Services

Programs
General Assistance for Housing Search
Residence Service

GOAL III. OPTIMAL HEALTH

HEALTH (PHYSICAL) MAINTENANCE AND CARE SERVICES SYSTEM

Community Health Maintenance Services

Programs
Prevention and Control of Communicable Diseases
Public Health Nursing
Environmental Sanitation
Occupational Health Concerns
Community Health Education
Blood Bank
Community Clinics
Home Health Care
Medical Supplies and Equipment Provision

Medical Care Services

Programs
Inpatient Medical Care
Outpatient Medical Care
Emergency Medical Care

MENTAL HEALTH MAINTENANCE AND CARE SERVICES SYSTEM

Psychiatric Treatment Services

Programs
Inpatient Psychiatric Care
Outpatient Psychiatric Care
Emergency Psychiatric Care
Residential Treatment of the Emotionally Disturbed
Transitional Care

Mental Health Preservation and Maintenance Services

Programs
Alcoholism Prevention and Treatment
Drug Abuse and Narcotics Addiction Prevention and Treatment

MENTAL RETARDATION SERVICES SYSTEM

Services for the Habilitation of the Mentally Retarded

Programs
Special Day Care of the Mentally Retarded

Aid to Families with Dependent Children
Old Age Assistance
Emergency Welfare Assistance
General Assistance
Special Benefits for Persons Aged 72 and Over

CONSUMER PROTECTION AND SAFETY SERVICES SYSTEM

Consumer Education Services

Programs
Direct Advice and Guidance
Mass Consumer Education

Services for the Quality Control of Consumer Goods and Products

Programs
Calibration and Testing
Agricultural Product Grading
Meat, Poultry, and Egg Products Inspection
and Supervision
Fishing Products Inspection and Certification

Protection Against Unfair Trade Practices Services

Programs
Commodity Exchange Regulation
Trade Practices Regulation

Consumer Safety Standards Services

Programs
Food Safety Standards
Drug Safety Standards
Product Safety Standards

Consumer Recourse Services

Programs
Consumer Complaints Processing and Investigation
Consumer Redress

TRANSPORTATION SERVICES SYSTEM

Earth, Water, and Air Transportation Development and Maintenance Services

Programs
Development and Maintenance of Earth Surface
Transportation
Development and Maintence of Water Surface
Transportation
Development and Maintenance of Air
Transportation
Special Transportation Needs of Selected Groups

Transportation (Traffic) Control and Safety Services

Programs
Earth Surface Traffic Control and Safety
Waterways Traffic Control and Safety
Air Traffic Control and Safety

PUBLIC PROTECTION, JUSTICE, AND SAFETY SERVICES SYSTEM

Administration of Justice Services

Programs
Law Enforcement
Dispensation of Justice and Resolution of
Disputes
Legal Aid and Defense
Detention of Law Violators and Alleged Law
Violators
Corrections

Crime and Delinquency Prevention Services

Programs
Crime Prevention
Delinquency Prevention

Fire Protection Services

Programs
Fire Prevention and Protection
Fire Control and Extinction

Public Disaster Services

Programs
Weather Warnings
Earthquake Hazards Reduction
Civil Defense and Emergency Preparedness
Disaster Relief

ENVIRONMENTAL PROTECTION AND ENRICHMENT SERVICES SYSTEM

Environmental Protection Services

Environmental Enrichment Services

Programs
Open Spaces and Urban Beautification
Historic Preservation

Residential Care Servic
Retarded

Programs
Short-Term Residential C
Retarded
Long-Term Custodial Car
Retarded

REHABILITATION S

Therapeutic Services for

Programs
Inpatient Rehabilitation
Outpatient Rehabilitation

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Aged 72 and Over

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Services

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TRANSPORTATION SERVICES SYSTEM

Earth, Water, and Air Transportation Development and Maintenance Services

Programs
Development and Maintenance of Earth Surface Transportation
Development and Maintence of Water Surface Transportation
Development and Maintenance of Air Transportation
Special Transportation Needs of Selected Groups

Transportation (Traffic) Control and Safety Services

Programs
Earth Surface Traffic Control and Safety
Waterways Traffic Control and Safety
Air Traffic Control and Safety

PUBLIC PROTECTION, JUSTICE, AND SAFETY SERVICES SYSTEM

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Dispensation of Justice and Resolution of Disputes
Legal Aid and Defense
Detention of Law Violators and Alleged Law Violators
Corrections

Crime and Delinquency Prevention Services

Programs
Crime Prevention
Delinquency Prevention

Fire Protection Services

Programs
Fire Prevention and Protection
Fire Control and Extinction

Public Disaster Services

Programs
Weather Warnings
Earthquake Hazards Reduction
Civil Defense and Emergency Preparedness
Disaster Relief

ENVIRONMENTAL PROTECTION AND ENRICHMENT SERVICES SYSTEM

Environmental Protection Services

Environmental Enrichment Services

Programs
Open Spaces and Urban Beautification
Historic Preservation

Residential Care Services for the Mentally Retarded

Programs
Short-Term Residential Care of the Mentally Retarded
Long-Term Custodial Care of the Mentally Retarded

REHABILITATION SERVICES SYSTEM

Therapeutic Services for the Handicapped

Programs
Inpatient Rehabilitation
Outpatient Rehabilitation

Appendix A—Continued

GOAL IV. ADEQUATE KNOWLEDGE AND SKILLS

FORMAL EDUCATIONAL SERVICES SYSTEM

Preschool Services

Programs
Early School Admissions

Elementary and Secondary School Services

Programs
Kindergarten
Primary or Elementary School Education
Secondary or High School Education

Higher Educational Services

Programs
Community Colleges or Junion College Education
Undergraduate College Education
Universities, Professional Schools and Technological Institutes Education

INFORMAL AND SUPPLEMENTARY EDUCATIONAL SERVICES SYSTEM

Informal Educational Services for Self-Instruction

Programs
Libraries
Occupationally or Professionally Oriented Groups or Specific Goal-Oriented Groups and Associations

GOAL V. OPTIMAL PERSONAL AND SOCIAL ADJUSTMENT AND DEVELOPMENT

INDIVIDUAL AND FAMILY LIFE SERVICES SYSTEM

Family Preservation and Strengthening Services

Programs
Counseling
Homemaker
Family Growth Control and Planning

Family Substitute Services

Programs
Adoption
Day Care
Foster Home Care
Group Home
Institutional Care

Crisis Intervention and Protective Services

Programs
Suicide Prevention and Protection Against Physical Self-Harm
Protection from Neglect, Abuse and Exploitation

Supportive Services to Individuals and Families

Programs
Retirement Preparation
Friendly Visiting
Assistance to Travelers, Newcomers, Migrants, Immigrants and Mobile Families
Emergency Assistance

GOAL VI. ADEQUAT
SOCIAL INSTRUMEN

MOBILIZATION OF PEO
SYSTEM

Community Organization Servic

Programs
Neighborhood Development
Community Planning and Devel

Political Organizations Service

Programs
Political Parties
Elections and Election Campaig

Volunteer Services

Programs
Volunteer Recruitment and Trai
Volunteer Placement and Super

RESOURCE DEVELOPM
SYSTEM

Human Service Programs Fund

Programs
Governmental Fund Raising or
Programs Funding
Voluntary Fund Raising
Acquisition of Charitable Found
Acquisition of Governmental Gr
Contracts

Appendix A—Continued

ATE KNOWLEDGE

AL SERVICES SYSTEM

School Services

ol Education
ducation

on College Education
cation
hools and
ducation

PLEMENTARY
ICES SYSTEM

es for Self-

nally Oriented
Oriented Groups

GOAL V. OPTIMAL PERSONAL AND SOCIAL ADJUSTMENT AND DEVELOPMENT

INDIVIDUAL AND FAMILY LIFE SERVICES SYSTEM

Family Preservation and Strengthening Services

Programs
Counseling
Homemaker
Family Growth Control and Planning

Family Substitute Services

Programs
Adoption
Day Care
Foster Home Care
Group Home
Institutional Care

Crisis Intervention and Protective Services

Programs
Suicide Prevention and Protection Against Physical Self-Harm
Protection from Neglect, Abuse and Exploitation

Supportive Services to Individuals and Families

Programs
Retirement Preparation
Friendly Visiting
Assistance to Travelers, Newcomers, Migrants, Immigrants and Mobile Families
Emergency Assistance

GOAL VI. ADEQUATELY ORGANIZED SOCIAL INSTRUMENTALITIES

MOBILIZATION OF PEOPLE SERVICES SYSTEM

Community Organization Services

Programs
Neighborhood Development
Community Planning and Development

Political Organizations Services

Programs
Political Parties
Elections and Election Campaigns

Volunteer Services

Programs
Volunteer Recruitment and Training
Volunteer Placement and Supervision

RESOURCE DEVELOPMENT SERVICES SYSTEM

Human Service Programs Funding Services

Programs
Governmental Fund Raising or Public Sector Programs Funding
Voluntary Fund Raising
Acquisition of Charitable Foundation Support
Acquisition of Governmental Grants and Contracts

Supplementary Educational Services

Programs

Adult Education

Special Educational Services for the Gifted and the Disadvantaged

Programs

Special Educational Opportunities for Gifted Children

Special Educational Opportunities for the Disadvantaged

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SOCIAL ADJUSTMENT, SOCIAL DEVELOPMENT AND SOCIAL USEFULNESS SERVICES SYSTEM

Recreational Services

Programs

Participatory Recreation

Spectator or Non-Participatory Recreation

Social Group Services

Programs

Social Adjustment

Social Development

Troop Type

Intergroup Relations Services

Programs

Special or Single Interest Group Promotion

Multi-Interest Community Relations

CULTURAL AND SPIRITUAL ENRICHMENT AND DEVELOPMENT SERVICES SYSTEM

Arts and Humanities Development and Subvention Services

Programs

Community Facilities for Arts and Humanities

Arts and Humanities Subsidization

Artistic and Cultural Opportunities Services

Programs

Personal Involvement and Active Participation in Artistic Pursuits

Arts Appreciation and Enjoyment

Religious or Spiritual Services

Programs

Group Worship

Independent Spiritual Pursuits

Economic Development Ser

Programs

Promotion of Tourism, Busin

Small Business Developmen

ADMINISTRATION AN CAPABILITY SERVICE

Administration Services

Programs

Personnel Recruitment and

Budgeting, Allocation and A

Purchasing

Plant and Facilities Operatio

Planning and Evaluation

Communication and Public

Programs

Public Relations

Research Services

Programs

Demonstration or Pilot Proje

Causational Research

Social Simulations

Social Forecasting

EQUAL OPPORTUNIT

Equal Opportunity Promotio

Programs

Civil Rights Promotion (Lega

Equal Employment Opportun

Promotion of Fair Housing P Practices

Equal Opportunity Recource

Programs

Equal Opportunity Mediation (Non-enforcement)

Equal Opportunity Recourse Enforcement

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SOCIAL ADJUSTMENT, SOCIAL DEVELOPMENT AND SOCIAL USEFULNESS SERVICES SYSTEM

Recreational Services

Programs
Participatory Recreation
Spectator or Non-Participatory Recreation

Social Group Services

Programs
Social Adjustment
Social Development
Troop Type

Intergroup Relations Services

Programs
Special or Single Interest Group Promotion
Multi-interest Community Relations

CULTURAL AND SPIRITUAL ENRICHMENT AND DEVELOPMENT SERVICES SYSTEM

Arts and Humanities Development and Subvention Services

Programs
Community Facilities for Arts and Humanities
Arts and Humanities Subsidization

Artistic and Cultural Opportunities Services

Programs
Personal Involvement and Active Participation in Artistic Pursuits
Arts Appreciation and Enjoyment

Religious or Spiritual Services

Programs
Group Worship
Independent Spiritual Pursuits

Economic Development Services

Programs
Promotion of Tourism, Business and Industries
Small Business Development

ADMINISTRATION AND MANAGEMENT CAPABILITY SERVICES SYSTEM

Administration Services

Programs
Personnel Recruitment and Training
Budgeting, Allocation and Agency Relations
Purchasing
Plant and Facilities Operation and Maintenance
Planning and Evaluation

Communication and Public Information Services

Programs
Public Relations

Research Services

Programs
Demonstration or Pilot Projects
Causational Research
Social Simulations
Social Forecasting

EQUAL OPPORTUNITY SERVICES SYSTEM

Equal Opportunity Promotion Services

Programs
Civil Rights Promotion (Legally Mandated)
Equal Employment Opportunity Promotion
Promotion of Fair Housing Policies and Practices

Equal Opportunity Recource Services

Programs
Equal Opportunity Mediation of Disputes (Non-enforcement)
Equal Opportunity Recourse Through Legal Enforcement

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REPORT: L07932.51                                              SAN JOAQUIN CO-DEPT OF PUBLIC ASSISTANCE
BUREAU: SJC SERVICES BUREAU                                       ** SSIS SERVICE PROFILE REPORT **               RUN DAT
DIVISION: FAMILY AND INDIVIDUAL SERVICES DIVISION                    MONTH ENDING- FEBRUARY, 1976
COMPLEX: COMPLEX 2 FAMILY FUNCTIONING                                   * DIRECT PROVISION *                            PAG
UNIT: FAMILY PLANNING UNIT

         *************************************************************************************************************
 SERVICE *        RECIPIENTS          *        DELIVERIES         *         SERVICE TIME ( HRS )             **   RECAP PERC
         * TOTAL *------PERCENT-------* TOTAL *------PERCENT------*  CLIENT  * TRAVEL *------PERCENT------**       OVERALL
         *        * NEW  N-P  CUR  FOR*       * NEW  N-P  CUR  FOR*   TIME   *  TIME  * NEW  N-P  CUR  FOR** RECIP  DELIV

002-COMMUNITY RESOURCES
  *ADULT-       2 50.0        100           1  100        100             .25           100        100         1.15    .27
  *CHILD-       0                                                                                               .00    .00

004-TRANSPORTATION REQUESTS
  *ADULT-       1             100           1           100             .25                      100          .57    .27
  *CHILD-       0                                                                                               .00    .00

006-FAMILY PLANNING RESOURCES
  *ADULT-       3 66.6        100           3 66.6         100                      1.50 50.0        100         1.73    .83
  *CHILD-       0                                                                                               .00    .00

008-SHELTER RESOURCES
  *ADULT-       1  100        100           1  100        100             .08           100        100          .57    .27
  *CHILD-       0                                                                                               .00    .00

020-CONSULTATION
  *ADULT-       1             100           1           100             .55                      100          .57    .27
  *CHILD-       1             100           1           100             .25                      100          .57    .27

021-INDIVIDUAL COUNSELING/THERAPY
  *ADULT-       1             100           1           100             .16                      100          .57    .27
  *CHILD-       0                                                                                               .00    .00

025-INVESTIGATION/PETITIONS
  *ADULT-       1             100           2           100            3.00                      100          .57    .55
  *CHILD-       0                                                                                               .00    .00

060-CONSULTATION
  *ADULT-       1  100        100           1  100        100             .50           100        100          .57    .27
  *CHILD-       0                                                                                               .00    .00

061-INDIVIDUAL COUNSELING/THERAPY
  *ADULT-       2 50.0        100           2 50.0        100             .75      1.00 85.7        100         1.15    .55
  *CHILD-       1             100           1           100             .50                      100          .57    .27

065-ARRANGEMENT/REVIEW
  *ADULT-       3 66.6        100           9 88.8        100            4.25       .75 80.0        100         1.73   2.51
  *CHILD-       1             100           4           100            2.00       .50              100          .57   1.11

069-CASE MANAGEMENT/REVIEW
  *ADULT-       3  100        100           4  100        100            1.25           100        100         1.73   1.11
  *CHILD-       0                                                                                               .00    .00

070-CONSULTATION
  *ADULT-       1  100        100           3  100        100             .91           100        100          .57    .83
  *CHILD-       0                                                                                               .00    .00

071-INDIVIDUAL COUNSELING/THERAPY
  *ADULT-       9 55.5       88.8 11.1     26 69.2       96.1  3.8       15.00      2.00 58.8       97.0  2.9    5.20   7.27
  *CHILD-       1      100  100             1       100 100             .75                 100  100          .57    .27
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                                            SAN JOAQUIN CO-DEPT OF PUBLIC ASSISTANCE
S BUREAU                                       ** SSIS SERVICE PROFILE REPORT **                RUN DATE: 03/17/76
D INDIVIDUAL SERVICES DIVISION                    MONTH ENDING- FEBRUARY, 1976
FAMILY FUNCTIONING                                   * DIRECT PROVISION *                           PAGE:  1 OF 13
NG UNIT

******************************************************************************************************************
ECIPIENTS          *         DELIVERIES         *          SERVICE TIME ( HRS )          **    RECAP PERCENTAGES   *
------PERCENT------* TOTAL *-------PERCENT-------* CLIENT *  TRAVEL *-------PERCENT-------**       OVERALL      *TOTL*
NEW  N-P  CUR  FOR*         * NEW  N-P  CUR  FOR*  TIME  *   TIME * NEW   N-P  CUR  FOR** RECIP  DELIV TIME*TIME*

RCES                                                                                                         0.09%
0.0       100             1  100       100            .25            100       100         1.15    .27    .09
                                                                                            .00    .00    .00

REQUESTS                                                                                                     0.09%
          100             1            100            .25                      100          .57    .27    .09
                                                                                            .00    .00    .00

 RESOURCES                                                                                                   0.55%
6.6       100             3 66.6       100                    1.50  50.0       100         1.73    .83    .55
                                                                                            .00    .00    .00

ES                                                                                                           0.03%
100       100             1  100       100            .08            100       100          .57    .27    .03
                                                                                            .00    .00    .00

                                                                                                             0.31%
          100             1            100            .58                      100          .57    .27    .21
          100             1            100            .25                      100          .57    .27    .09

SELING/THERAPY                                                                                               0.06%
          100             1            100            .16                      100          .57    .27    .06
                                                                                            .00    .00    .00

ETITIONS                                                                                                     1.11%
          100             2            100           3.00                      100          .57    .55   1.11
                                                                                            .00    .00    .00

                                                                                                             0.18%
100       100             1  100       100            .50            100       100          .57    .27    .18
                                                                                            .00    .00    .00

SELING/THERAPY                                                                                               0.83%
0.0       100             2 50.0       100            .75     1.00  85.7       100         1.15    .55    .65
          100             1            100            .50                      100          .57    .27    .18

IEW                                                                                                          2.79%
6.6       100             9 88.8       100           4.25      .75  80.0       100         1.73   2.51   1.86
          100             4            100           2.00      .50             100          .57   1.11    .93

/REVIEW                                                                                                      0.46%
100       100             4  100       100           1.25            100       100         1.73   1.11    .46
                                                                                            .00    .00    .00

                                                                                                             0.34%
100       100             3  100       100            .91            100       100          .57    .83    .34
                                                                                            .00    .00    .00

SELING/THERAPY                                                                                               6.61%
5.5      88.8 11.1       26 69.2      96.1  3.8     15.00     2.00  58.8      97.0  2.9    5.20   7.27   6.33
     100  100             1       100  100            .75                 100  100          .57    .27    .27
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REPORT: L07932.51                                          SAN JOAQUIN CO-DEPT OF PUBLIC ASSISTANCE
BUREAU: SJC SERVICES BUREAU                                   ** SSIS SERVICE PROFILE REPORT **                  RUN DAT
                                                               QUARTER ENDING- DECEMBER, 1975
                                                                    * DIRECT PROVISION *                                 PA

              ****************************************************************************************************************
  SERVICE *              RECIPIENTS             *               DELIVERIES              *           SERVICE TIME ( HRS )                **     RECAP PERCE
          * TOTAL *-------PERCENT-------* TOTAL *-------PERCENT-------* CLIENT *  TRAVEL *-------PERCENT-------**        OVERALL
          *        * NEW  N-P  CUR  ELG*        * NEW  N-P  CUR  ELG*   TIME  *   TIME  * NEW  N-P  CUR  ELG** RECIP   DELIV

 00X-INFO & REFERRAL SVCS
     *ADULT-     492 54.8   .8 95.5  3.4    1,140 52.0   .7 95.7  2.8     563.13     111.93 40.9  1.2 95.3  3.4    9.36    3.63
     *CHILD-      11 27.2 18.1  100            18 16.6 11.1  100             9.58       2.75  8.1  6.0  100           .20     .05

 02X-PROTECT SVCS FOR CHILD
     *ADULT-     334 35.0  7.4 87.4  6.2    1,994 31.1  6.2 81.5  5.8   1,231.80     267.49 30.5  6.8 81.7  6.7    6.35    6.36
     *CHILD-     241 35.2 57.2 75.5  8.7    1,457 47.2 50.6 58.3 13.5   1,189.21     226.75 52.5 38.1 56.0 11.8    4.58    4.65

 03X-PROTECT SVCS FOR ADULT
     *ADULT-     342 32.1   .8 83.6 11.9    2,071 30.1   .5 80.8 10.4   1,262.48     147.16 31.2   .6 79.4 12.3    6.50    6.61
     *CHILD-       9 22.2 55.5 88.8 11.1       13 23.0 61.5 92.3  7.6       9.41       1.33 23.2 53.4 90.6  9.3     .17     .04

 04X-OUT-OF-HOME SVCS - CHILD
     *ADULT-     143 19.5 16.7 84.6 13.9      477 19.4 17.8 85.9 13.2     442.33      80.66 17.0 10.8 87.2 11.7    2.72    1.52
     *CHILD-     344 14.2 30.8 85.4 11.9    2,070 12.4 25.1 80.5 16.7   1,481.73     331.83 13.1 23.6 82.6 13.8    6.54    6.60

 05X-OUT-OF-HOME SVCS - ADULT
     *ADULT-     409 30.3       93.1  6.3    1,440 36.5       90.7  8.4     822.67     176.01 37.9       92.1  6.6    7.78    4.59
     *CHILD-       4 25.0        100            7 14.2        100          2.66        .66 35.0        100           .07     .02

 06X-CHILD CARE SVCS
     *ADULT-     223 35.4  1.3 91.0   .8      958 31.8   .7 92.7  2.9     471.38      64.66 31.1   .9 87.7  4.3    4.24    3.05
     *CHILD-      19 26.3 15.7 78.9           112 33.0 18.7 88.3            90.76      59.75 38.5 13.9 86.3           .36     .35

 07X-HLTH RLTD SVCS-ADULT/CHILD
     *ADULT-     505 44.5   .9 93.0  6.3    1,846 47.7   .6 88.7  9.7   1,292.10     260.50 49.1   .4 86.3 12.9    9.61    5.89
     *CHILD-      28 17.8 82.1 92.8  3.5      105 33.3 84.7 92.3  1.9      92.91      14.16 16.3 75.7 95.4   .3     .53     .33

 08X-FAM PLANNING SVCS
     *ADULT-     349 69.6       85.1 14.8      912 66.1       84.9 15.0     704.80     153.33 65.3       86.0 13.9    6.64    2.91
     *CHILD-      44 77.2  4.5 70.4 29.5      110 81.3  4.5 66.6 33.3      82.90      12.42 79.6  2.3 70.1 29.8     .83     .35

 09X-HMKR SVCS - ADULTS
     *ADULT-      24 25.0       83.3  4.1       58 27.5       84.4 10.3      27.33       9.83 20.8       76.9  6.9     .45     .18
     *CHILD-       0                                                                                                 .00     .00

 11X-CHORE SVCS - ADULTS
     *ADULT-   1,203 18.5       96.2  3.4    5,871 20.6       96.5  3.2   2,671.83     530.33 20.2       96.4  3.3   22.89   18.74
     *CHILD-       2  100        100            2  100        100          1.50        .16  100        100           .03     .00

 12X-EMPLYMT SVCS -AFDC
     *ADULT-     559 80.8   .5 98.3  1.4    1,457 80.8   .2 98.1  1.7     558.30      18.00 80.4   .1 97.8  1.7   10.63    4.65
     *CHILD-      11 63.6        100           25 84.0        100          11.41        .75 67.1        100           .20     .07

 13X-SPEC CARE-CHILDREN-OWN HOME
     *ADULT-     934 24.3  2.6 98.0  1.6    4,656 23.1  2.8 98.6  1.1   2,819.36     509.27 23.2  3.2 98.1  1.5   17.77   14.86
     *CHILD-      35 20.0 45.7 85.7 11.4      129 15.5 37.2 86.0 12.4     144.50      24.25  8.1 34.3 88.1 11.2     .66     .41

 14X-EMPLYMT/TRAINING FOR BLIND
     *ADULT-       4 50.0       50.0 25.0       12 58.3       33.3 33.3       7.16       1.00 55.1       35.7 21.4     .07     .03
     *CHILD-       0                                                                                                 .00     .00
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                         SAN JOAQUIN CO-DEPT OF PUBLIC ASSISTANCE
                          ** SSIS SERVICE PROFILE REPORT **                         RUN DATE: 02/27/76
                            QUARTER ENDING- DECEMBER, 1975
                                 * DIRECT PROVISION *                                PAGE: 1 OF 5

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S          *          DELIVERIES           *              SERVICE TIME ( HRS )          **   RECAP PERCENTAGES   *
RCENT------* TOTAL *-------PERCENT-------* CLIENT *  TRAVEL *-------PERCENT-------**      OVERALL      *TOTL*
  CUR  ELG*         * NEW   N-P   CUR   ELG*  TIME   *   TIME   * NEW   N-P   CUR   ELG** RECIP  DELIV  TIME*TIME*

                                                                                                          3.07%
  95.5  3.4   1,140  52.0    .7  95.7   2.8    563.13     111.93  40.9   1.2  95.3   3.4    9.36   3.63   3.01
  100             18  16.6  11.1  100            9.58       2.75   8.1   6.0  100            .20    .05    .05

                                                                                                         13.02%
  87.4  6.1   1,994  31.1   6.2  81.5   5.8  1,231.80     267.49  30.5   6.8  81.7   6.7    6.35   6.36   6.69
  75.5  8.7   1,457  47.2  50.6  58.3  13.5  1,189.21     226.75  52.5  38.1  56.0  11.8    4.58   4.65   6.32

                                                                                                          6.34%
  83.6 11.9   2,071  30.1    .5  80.8  10.4  1,262.48     147.16  31.2    .6  79.4  12.3    6.50   6.61   6.29
  88.8 11.1      13  23.0  61.5  92.3   7.6      9.41       1.33  23.2  53.4  90.6   9.3     .17    .04    .04
LD                                                                                                       10.43%
7 84.6 13.9     477  19.4  17.8  85.9  13.2    442.33      80.66  17.0  10.8  87.2  11.7    2.72   1.52   2.33
  85.4 11.9   2,070  12.4  25.1  80.5  16.7  1,481.73     331.83  13.1  23.6  82.6  13.8    6.54   6.60   8.10
T                                                                                                         4.47%
  93.1  6.3   1,440  36.5        90.7   8.4    822.67     176.01  37.9        92.1   6.6    7.78   4.59   4.46
  100              7  14.2        100            2.66        .66  35.0        100            .07    .02    .01

                                                                                                          3.06%
  91.0   .8     958  31.8    .7  92.7   2.9    471.38      64.66  31.1    .9  87.7   4.3    4.24   3.05   2.39
7 78.9           112  33.0  18.7  88.3            90.76      59.75  38.5  13.9  86.3           .36    .35    .67
HILD                                                                                                      7.41%
  93.0  6.3   1,846  47.7    .6  88.7   9.7  1,292.10     260.50  49.1    .4  86.3  12.9    9.61   5.89   6.93
  92.8  3.5     105  33.3  84.7  92.3   1.9     92.91      14.16  16.3  75.7  95.4    .3     .53    .33    .47

                                                                                                          4.25%
  85.1 14.8     912  66.1        84.9  15.0    704.80     153.33  65.3        86.0  13.9    6.64   2.91   3.83
  70.4 29.5     110  81.3   4.5  66.6  33.3     82.90      12.42  79.6   2.3  70.1  29.8     .83    .35    .42

                                                                                                          0.16%
  83.3  4.1      58  27.5        84.4  10.3     27.33       9.83  20.8        76.9   6.9     .45    .18    .16
                                                                                             .00    .00    .00

                                                                                                         14.31%
  96.2  3.4   5,871  20.6        96.5   3.2  2,671.83     530.33  20.2        96.4   3.3   22.89  18.74  14.30
  100              2  100         100            1.50        .16  100         100            .03    .00    .00

                                                                                                          2.62%
  98.3  1.6   1,457  80.8    .2  98.1   1.7    558.30      18.00  80.4    .1  97.8   1.7   10.63   4.65   2.57
  100             25  84.0        100           11.41        .75  67.1        100            .20    .07    .05
HOME                                                                                                     15.62%
  98.0  1.6   4,656  23.1   2.8  98.6   1.1  2,819.36     509.27  23.2   3.2  98.1   1.5   17.77  14.86  14.86
7 83.7 11.4     129  15.5  37.2  86.0  12.4    144.50      24.25   8.1  34.3  88.1  11.2     .66    .41    .75
IND                                                                                                       0.03%
  50.0 25.0      12  58.3        33.3  33.3      7.16       1.00  55.1        35.7  21.4     .07    .03    .03
                                                                                             .00    .00    .00
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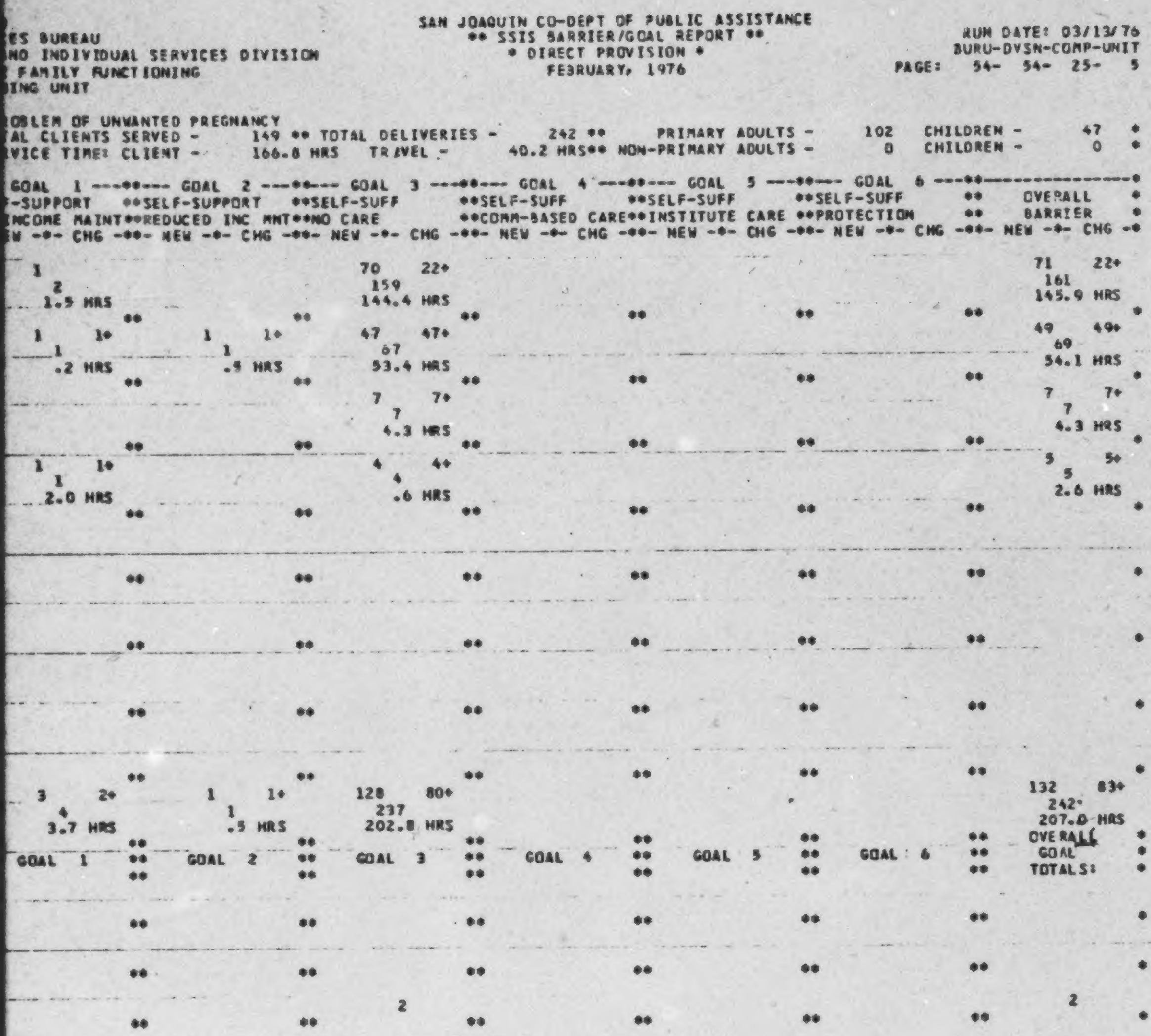
REPORT - L07940.50                                         SAN JOAQUIN CO-DEPT OF PUBLIC ASSISTANCE
BUREAU: SJC SERVICES BUREAU                                    ** SSIS BARRIER/GOAL REPORT **                   RUN DATE
DIVISION: FAMILY AND INDIVIDUAL SERVICES DIVISION                  * DIRECT PROVISION *                         BURU-DVS
COMPLEX: COMPLEX 2 FAMILY FUNCTIONING                                   FEBRUARY, 1976                  PAGE:   54-   5
UNIT: FAMILY PLANNING UNIT

    BARRIER: 2E-PROBLEM OF UNWANTED PREGNANCY
            ** TOTAL CLIENTS SERVED -     149 ** TOTAL DELIVERIES -     242 **     PRIMARY ADULTS -     102   CHILDREN -
            ** SERVICE TIME: CLIENT -     166.8 HRS   TRAVEL -     40.2 HRS** NON-PRIMARY ADULTS -       0   CHILDREN -

*-----------**--- GOAL  1 ---**--- GOAL  2 ---**--- GOAL  3 ---**--- GOAL  4 ---**--- GOAL  5 ---**--- GOAL  6 ---**-----
*  BARRIER  **SELF-SUPPORT   **SELF-SUPPORT   **SELF-SUFF      **SELF-SUFF      **SELF-SUFF      **SELF-SUFF      **
*  STATUS   **NO INCOME MAINT**REDUCED INC MNT**NO CARE        **COMM-BASED CARE**INSTITUTE CARE **PROTECTION     **
*-----------**- NEW -*- CHG -**- NEW -*- CHG -**- NEW -*- CHG -**- NEW -*- CHG -**- NEW -*- CHG -**- NEW -*- CHG -**- NEW

1-REMOVABLE         1                                70    22+
 *DELIVERIES-         2                               159
 *TOTAL TIME-        1.5 HRS                         144.4 HRS
             *               **               **               **               **               **               **
  A-REMOVED..       1     1+         1     1+        47    47+
 *DELIVERIES-         1                1               67
 *TOTAL TIME-         .2 HRS           .5 HRS         53.4 HRS
             *               **               **               **               **               **               **
  B-CLOSED...                                         7     7+
 *DELIVERIES-                                           7
 *TOTAL TIME-                                          4.3 HRS
             *               **               **               **               **               **               **
  C-UNMET....       1     1+                          4     4+
 *DELIVERIES-         1                                 4
 *TOTAL TIME-        2.0 HRS                            .6 HRS
             *               **               **               **               **               **               **
2-NON-RMVABLE
 *DELIVERIES-
 *TOTAL TIME-
             *               **               **               **               **               **               **
  A-REMOVED..
 *DELIVERIES-
 *TOTAL TIME-
             *               **               **               **               **               **               **
  B-CLOSED...
 *DELIVERIES-
 *TOTAL TIME-
             *               **               **               **               **               **               **
  C-UNMET....
 *DELIVERIES-
 *TOTAL TIME-
             *               **               **               **               **               **               **
TOTAL BY GOAL       3     2+         1     1+       128    80+
 *DELIVERIES-         4                1              237
 *TOTAL TIME-        3.7 HRS           .5 HRS        202.8 HRS
*-----------**               **               **               **               **               **               **
*GOAL STATUS**    GOAL  1    **    GOAL  2    **    GOAL  3    **    GOAL  4    **    GOAL  5    **    GOAL  6    **
*-----------**               **               **               **               **               **               **
1-TERMINATED -
   NOT ACHVD.
             *               **               **               **               **               **               **
2-ACHIEVED -
SVC CONTINUED
             *               **               **               **               **               **               **
3-ACHIEVED -
SVC DISCONTD.                                           2
             *               **               **               **               **               **               **
```



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                                         SAN JOAQUIN CO-DEPT OF PUBLIC ASSISTANCE
ES BUREAU                                     ** SSIS BARRIER/GOAL REPORT **                  RUN DATE: 03/13/76
NO INDIVIDUAL SERVICES DIVISION                   * DIRECT PROVISION *                         BURU-DVSN-COMP-UNIT
 FAMILY FUNCTIONING                                   FEBRUARY, 1976                     PAGE:   54-  54-  25-   5
ING UNIT

OBLEM OF UNWANTED PREGNANCY
AL CLIENTS SERVED -      149 ** TOTAL DELIVERIES -     242 **     PRIMARY ADULTS -     102   CHILDREN -       47   *
VICE TIME: CLIENT -      166.8 HRS   TRAVEL -      40.2 HRS** NON-PRIMARY ADULTS -       0   CHILDREN -        0   *

 GOAL  1 ---**--- GOAL  2 ---**--- GOAL  3 ---**--- GOAL  4 ---**--- GOAL  5 ---**--- GOAL  6 ---**---------------*
-SUPPORT   **SELF-SUPPORT   **SELF-SUFF       **SELF-SUFF       **SELF-SUFF       **SELF-SUFF      **    OVERALL   *
NCOME MAINT**REDUCED INC MNT**NO CARE         **COMM-BASED CARE**INSTITUTE CARE **PROTECTION      **    BARRIER   *
W -*- CHG -**- NEW -*- CHG -**- NEW -*- CHG -**- NEW -*- CHG -**- NEW -*- CHG -**- NEW -*- CHG -**- NEW -*- CHG -*

   1                               70    22+                                                           71    22+
     2                               159                                                                161
    1.5 HRS                        144.4 HRS                                                           145.9 HRS
           **               **               **               **               **               **                *
   1     1+         1     1+       47    47+                                                           49    49+
     1                1                67                                                                 69
     .2 HRS           .5 HRS        53.4 HRS                                                            54.1 HRS
           **               **               **               **               **               **                *
                                    7     7+                                                            7     7+
                                       7                                                                  7
                                     4.3 HRS                                                              4.3 HRS
           **               **               **               **               **               **                *
   1     1+                         4     4+                                                            5     5+
     1                                 4                                                                  5
    2.0 HRS                               .6 HRS                                                          2.6 HRS
           **               **               **               **               **               **                *
           **               **               **               **               **               **                *
           **               **               **               **               **               **                *
           **               **               **               **               **               **                *
           **               **               **               **               **               **                *
   3     2+         1     1+       128   80+                                                           132   83+
     4                1              237                                                                242
    3.7 HRS           .5 HRS        202.8 HRS                                                           207.0 HRS
           **               **               **               **               **               **     OVERALL    *
 GOAL  1   **     GOAL  2   **     GOAL  3   **     GOAL  4   **     GOAL  5   **     GOAL  6   **      GOAL      *
           **               **               **               **               **               **     TOTALS:    *
           **               **               **               **               **               **                *
           **               **               **               **               **               **                *
                                       2                                                                  2
           **               **               **               **               **               **                *
```

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                                                      SAN JOAQUIN CO-DEPT OF PUBLIC ASSISTANCE
REPORT: L07928.50                                                                                                          RUN DAT
                                                          ** SSIS PLAN RECAP REPORT **

                                                       QUARTER ENDING- DECEMBER, 1975

                                                          ***** COMPLEX *****        ***** COMPLEX *****        ***** COMPL
                                                          COMPLEX 1 ADULT IN A       COMPLEX 2 FAMILY FUN       COMPLEX 3 I
                                                          ND OUT-OF-HOME CARE        CTIONING                   RRAL, AND S
**************************************************************************************************************************

VI.  BARRIER PROFILE (TOTAL BARRIERS - OPEN PLANS):     *          TOTAL                      TOTAL                      TOT
                                                                   2,575                      1,939                      1,3
  A.  BARRIER STATUS (PERCENTAGES OF TOTAL)             *      ACTIVE    INACTIVE         ACTIVE    INACTIVE          ACTIVE

   * REMOVEABLE BARRIERS *                              *      51.14*  %  10.67*          84.21*  %  14.07*          90.69*
    1 - OPEN                                                   42.25   %   6.95           59.87   %   6.85           43.10
    2 - REMOVED                                         *       5.78   %   3.37           15.83   %   5.41           14.69
    3 - CLOSED                                                  2.99   %    .31            7.06   %   1.49           31.10
    4 - CLOSED (UNMET)                                  *        .11   %    .03            1.44   %    .30            1.79

   * NON-REMOVEABLE BARRIERS *                          *      33.98*  %   4.19*           1.44*  %    .25*            .73*
    5 - OPEN                                                   27.96   %   3.96            1.18   %    .20             .57
    6 - REMOVED                                         *        .19   %    .00             .00   %    .00             .00
    7 - CLOSED                                                  5.16   %    .11             .20   %    .05             .16
    8 - CLOSED (UNMET)                                  *        .66   %    .11             .05   %    .00             .00

  B.  AVERAGE UNIQUE BARRIERS PER CLIENT                *       1.07   #    .19            1.64   #    .27            1.67
  C.  AVERAGE TOTAL BARRIERS PER CLIENT                          .79   #    .48            1.89   #    .03            1.83
  D.  AVERAGE BARRIERS PER PLAN                         *        .77   #    .48            1.88   #    .03            1.79
---------------------------------------------------------
VII.  SERVICE PROFILE BY METHOD OF DELIVERY-ACTIVE PLANS:*

   * OVERALL TOTAL SERVICES/AVERAGE SERVICES PER PLAN *  *     TOTAL      AVERAGE          TOTAL      AVERAGE          TOTAL
  A.  DIRECT PROVISION                                          2,877  #   1.66           1,795  #   2.02           1,549
  B.  PURCHASE PUBLIC                                   *          0  #    .00               0  #    .00               0
  C.  PURCHASE PRIVATE                                             0  #    .00               0  #    .00               0
  D.  VOLUNTEER                                         *          0  #    .00               0  #    .00               0

   * AVERAGE (TOTAL/UNIQUE) SERVICES PER CLIENT *       *      TOTAL      UNIQUE           TOTAL      UNIQUE           TOTAL
  E.  DIRECT PROVISION                                          1.69  #    1.67            2.03  #    2.02            2.40
  F.  PURCHASE PUBLIC                                   *        .00  #     .00             .00  #     .00             .00
  G.  PURCHASE PRIVATE                                           .00  #     .00             .00  #     .00             .00
  H.  VOLUNTEER                                         *        .00  #     .00             .00  #     .00             .00
---------------------------------------------------------
VIII. DELIVERY INFORMATION FOR THIS PERIOD--DIRECT--     *
                                                               PRIME      NON-PRI          PRIME      NON-PRI          PRIME
  A.  NUMBER OF DELIVERIES (PRIME/NON-PRIME)            *      9,625            1          4,712          171          2,896
  B.  DELIVERY TIME - HOURS (PRIME/NON-PRIME)                  5,997            0          4,522          184          1,431
  C.  AVERAGE DELIVERY TIME - HOURS (PRIME/NON-PRIME)   *        .62          .50            .95         1.07            .50
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                    SAN JOAQUIN CO-DEPT OF PUBLIC ASSISTANCE
                                                                                          RUN DATE: 02/27/76
                          ** SSIS PLAN RECAP REPORT **
                                                                                          PAGE: 1H 2V
                       QUARTER ENDING- DECEMBER, 1975
                                   ***** COMPLEX  *****     ***** COMPLEX  *****     ***** COMPLEX  *****
                                   COMPLEX 1 ADULT IN A     COMPLEX 2 FAMILY FUN     COMPLEX 3 INFO, REFE
                                   ND OUT-OF-HOME CARE      CTIONING                 RRAL, AND SPEC. SERV
****************************************************************************************************************

FILE (TOTAL BARRIERS - OPEN PLANS):     *        TOTAL                    TOTAL                    TOTAL
                                                 2,575                    1,939                    1,225
TUS (PERCENTAGES OF TOTAL)              *   ACTIVE    INACTIVE      ACTIVE    INACTIVE      ACTIVE    INACTIVE

ARRIERS *                               *   51.14*  %   10.67*      84.21*  %   14.07*      90.69*  %    8.57*
                                            42.25   %    6.95       59.87   %    6.85       43.10   %     .73
                                        *    5.78   %    3.37       15.83   %    5.41       14.69   %    3.26
                                             2.99   %     .31        7.06   %    1.49       31.10   %    4.48
UNMET)                                  *     .11   %     .03        1.44   %     .30        1.79   %     .08

LE BARRIERS *                           *   33.98*  %    4.19*       1.44*  %     .25*        .73*  %     .00*
                                            27.96   %    3.96        1.18   %     .20         .57   %     .00
                                        *     .19   %     .00         .00   %     .00         .00   %     .00
                                             5.16   %     .11         .20   %     .05         .16   %     .00
UNMET)                                  *     .66   %     .11         .05   %     .00         .00   %     .00

IQUE BARRIERS PER CLIENT                *    1.07   #     .19        1.64   #     .27        1.67   #     .15
TAL BARRIERS PER CLIENT                       .79   #     .48        1.89   #     .03        1.83   #     .01
RIERS PER PLAN                          *     .77   #     .48        1.88   #     .03        1.79   #     .01
----------------------------------------
UFILE BY METHOD OF DELIVERY-ACTIVE PLANS:*

L SERVICES/AVERAGE SERVICES PER PLAN *  *   TOTAL      AVERAGE      TOTAL      AVERAGE      TOTAL      AVERAGE
VISION                                      2,877   #     1.66      1,795   #     2.02      1,549   #     2.35
UBLIC                                   *       0   #      .00          0   #      .00          0   #      .00
RIVATE                                          0   #      .00          0   #      .00          0   #      .00
                                        *       0   #      .00          0   #      .00          0   #      .00

AL/UNIQUE) SERVICES PER CLIENT *        *   TOTAL       UNIQUE      TOTAL       UNIQUE      TOTAL       UNIQUE
VISION                                       1.69   #     1.67       2.03   #     2.02       2.40   #     2.38
UBLIC                                   *     .00   #      .00        .00   #      .00        .00   #      .00
RIVATE                                        .00   #      .00        .00   #      .00        .00   #      .00
                                        *     .00   #      .00        .00   #      .00        .00   #      .00
----------------------------------------
NFORMATION FOR THIS PERIOD--DIRECT--    *

                                            PRIME      NON-PRI      PRIME      NON-PRI      PRIME      NON-PRI
DELIVERIES (PRIME/NON-PRIME)            *   9,[illegible]25          1      4,712        171      2,896         13
IME - HOURS (PRIME/NON-PRIME)               5,9[illegible]7          0      4,522        184      1,451          4
LIVERY TIME - HOURS (PRIME/NON-PRIME)   *     .62        .50        .95       1.07        .50        .32
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APPENDIX B

APPENDIX C

UTAH SERVICE INVENTORY—TITLE XX DIRECT SERVICES

SERVICE: ADOPTION

Social Service activities provided by the public social service agency or by an approved private agency under the approved plan for the purpose of adoption of a child who is legally free or expected to be legally free for adoption.

Code		Range Units
ACA	Adoptive home studies, independent studies; court related activities and reporting.	10–12
ACS	Obtaining natural parent relinquishment; placement and supervision of child; guidance to adopting parents; interim court reports; post-adoption consultation.	8–12
*SAP	Subsidized adoptive payment.	

SERVICE: COUNSELING—DRUG AND ALCOHOL

Activities which help an individual or family to arrest alcoholism, reduce drug dependency, deal with related problems, strengthen family relations and improve individual and family functioning through counseling techniques and the provision of specific services including provision of care and provision of room and board for a period of not more than six consecutive months as an integral but subordinate part of the service.

Code		Range Units
ADC	Alcohol and drug related counseling.	14–10

*Contract

TION

ocial Service activities provided by the public social service agency or by
ı approved private agency under the approved plan for the purpose of
loption of a child who is legally free or expected to be legally free for
loption.

	Range of Units	Source
doptive home studies, independent studies; court related activities and porting.	10–12	A
btaining natural parent relinquishment; placement and supervision of hild; guidance to adopting parents; interim court reports; post-adoption onsultation.	8–12	A
ubsidized adoptive payment.		P

SELING—DRUG AND ALCOHOL

ctivities which help an individual or family to arrest alcoholism, reduce
rug dependency, deal with related problems, strengthen family relations
nd improve individual and family functioning through counseling
chniques and the provision of specific services including provision of care
nd provision of room and board for a period of not more than six
onsecutive months as an integral but subordinate part of the service.

	Range of Units	Source
lcohol and drug related counseling.	14–10	A
		P

SERVICE: COUNSELING

Activities which help individuals or families to meet crisis situations and to learn better communication skills, to improve family relationships or to resolve personal problems through either individual or group counseling.

Code		Range Units
CIA	Individual adjustment counseling.	14–26
CSE	Social Study Evaluation.	2–10
CPE	Psychological testing/evaluation.	2–10
CXE	Psychiatric evaluation.	2–10
FCC	Parenting counseling; services to children in their own homes.	14–20
FFC	Family relations counseling.	14–20

SERVICE: DAY CARE—ADULT

Placement of an adult in day care less than 24 hours per day, including pre-placement counseling, determination of appropriate placement; placement supervision and evaluation of placement including provisions of care by a licensed provider; transportation and food less than three meals per day that does not supplant basic nutritional needs.

Code		Range Units
DCA	Placement and supervision; consultation to provider and natural family.	6–18
*DAP	Adult group care payment.	
*DHP	Adult family care payment.	

ELING

tivities which help individuals or families to meet crisis situations and to rn better communication skills, to improve family relationships or to olve personal problems through either individual or group counseling.

	Range of Units	Source
ividual adjustment counseling.	14–26	A, P
cial Study Evaluation.	2–10	A, P
ychological testing/evaluation.	2–10	A, P
ychiatric evaluation.	2–10	A, P
renting counseling; services to children in their own homes.	14–20	A, P
mily relations counseling.	14–20	A

ARE—ADULT

cement of an adult in day care less than 24 hours per day, including -placement counseling, determination of appropriate placement; cement supervision and evaluation of placement including provisions of e by a licensed provider; transportation and food less than three meals day that does not supplant basic nutritional needs.

	Range of Units	Source
cement and supervision; consultation to provider and natural family.	6–18	A
ult group care payment.		P
ult family care payment.		P

SERVICE: DAY CARE—CHILDREN

Arrangements for placement of a child in regular or specialized developmental day care in the licensed facility for less than 24-hours per day including pre-placement, preparation and planning and supervision to assure the service is meeting the child's needs, including provision of care by a licensed provider; transportation and food, less than three meals per day, that does not supplant basic nutritional needs.

Code		Range Units
DCC	Placement and supervision consultation to provider and natural family.	6–18
*DFP	Family care payment.	
*DGP	Group care payment.	
*DSP	Specialized care payment.	
*DTP	Day care transportation.	

SERVICE: DEVELOPMENTALLY DISABLED—SHELTERED EMPLOYMENT

Services which prepare for and supervise the developmentally disabled and physically handicapped client for vocational skills and work programs in sheltered workshops and other community locations and pay for the provision of services.

Code		Range Units
MCS	Activities which connect, supervise and follow-up consumer and family when services are being purchased by contacts or from another source.	10–16
*SEM	Sheltered workshop activities.	

ARE—CHILDREN

rrangements for placement of a child in regular or specialized evelopmental day care in the licensed facility for less than 24-hours per ay including pre-placement, preparation and planning and supervision to ssure the service is meeting the child's needs, including provision of are by a licensed provider; transportation and food, less than three meals r day, that does not supplant basic nutritional needs.

	Range of Units	Source
lacement and supervision consultation to provider and natural family.	6–18	A, P
mily care payment.		P
oup care payment.		P
ecialized care payment.		P
y care transportation.		P

OPMENTALLY DISABLED—SHELTERED EMPLOYMENT

rvices which prepare for and supervise the developmentally disabled and ysically handicapped client for vocational skills and work programs in eltered workshops and other community locations and pay for the ovision of services.

	Range of Units	Source
tivities which connect, supervise and follow-up consumer and family en services are being purchased by contacts or from another source.	10–16	A
eltered workshop activities.		P

SERVICE: DEVELOPMENTALLY DISABLED—FAMILY GUIDANCE

Conferring with parents/care taker/relatives of the developmentally disabled individual to assist them to understand the nature and the extent of the disability, to understand the problem of the disability and to consider and accept appropriate and available alternatives for care, training and/or treatment of the disabled individual.

Code		Range Units
MRG	Counseling and guidance activities.	12–16

SERVICE: DEVELOPMENTALLY DISABLED—EVALUATION

Services which provide guidance and supervision for the developmentally disabled and handicapped to meet abilities and needs and develop programs to meet their needs and pay for the provision of services.

Code		Range Units
MRE	Testing and evaluation.	5–8

*Contract

SERVICE: DEVELOPMENTALLY DISABLED SELF CARE AND INDEPENDENT LIVING TRA

Services which assist, support and guide the developmentally disabled to acquire basic self-care and developmental skills and to prepare for and maintain themselves in a living arrangement with moderate to minimal supervision which will increase independence and normalization, including payment for the provision of services.

PMENTALLY DISABLED—FAMILY GUIDANCE

ferring with parents/care taker/relatives of the developmentally
bled individual to assist them to understand the nature and the extent
e disability, to understand the problem of the disability and to consider
accept appropriate and available alternatives for care, training and/or
tment of the disabled individual.

	Range of Units	Source
nseling and guidance activities.	12–16	A

PMENTALLY DISABLED—EVALUATION

vices which provide guidance and supervision for the developmentally
bled and handicapped to meet abilities and needs and develop
grams to meet their needs and pay for the provision of services.

	Range of Units	Source
ting and evaluation.	5–8	A P

PMENTALLY DISABLED SELF CARE AND INDEPENDENT LIVING TRAINING

vices which assist, support and guide the developmentally disabled to
uire basic self-care and developmental skills and to prepare for and
ntain themselves in a living arrangement with moderate to minimal
ervision which will increase independence and normalization, including
ment for the provision of services.

Code		Range Units
MSC	Activities which connect, supervise and follow-up the MR consumer and family when services are being purchased by contract.	10–16
*SPC	Activities which assist the MR person to achieve self-care.	
SIS	Activities which support and guide the MR consumer in an independent living situation.	16–20

SERVICE: EDUCATION GUIDANCE

Activities which help enable the individual to begin or to continue an educational program below college level, explore educational alternatives and evaluate these alternatives, decide on educational goals, work toward these goals by coordinating with training programs and arranging for admission including appropriate tutoring, fees and tuition not paid by State educational instiutions.

Code		Range Units
EDG	Educational guidance.	8–12

SERVICE: EMPLOYMENT GUIDANCE TRAINING

Activities designed to help an individual decide vocational goals, enter the appropriate training courses, develop job skills and work behavior and attitudes needed to obtain and/ or retain employment.

Code		Range Units
EMG	Counseling and guidance, WIN non-WIN.	6–10

	Range of Units	Source
ivities which connect, supervise and follow-up the MR consumer and ily when services are being purchased by contract.	10–16	A
ivities which assist the MR person to achieve self-care.		P
ivities which support and guide the MR consumer in an independent ng situation.	16–20	A

TION GUIDANCE

ivities which help enable the individual to begin or to continue an
cational program below college level, explore educational alternatives
evaluate these alternatives, decide on educational goals, work toward
se goals by coordinating with training programs and arranging for
nission including appropriate tutoring, fees and tuition not paid by
te educational instiutions.

	Range of Units	Source
cational guidance.	8–12	A

YMENT GUIDANCE TRAINING

vities designed to help an individual decide vocational goals, enter the
ropriate training courses, develop job skills and work behavior and
udes needed to obtain and/ or retain employment.

	Range of Units	Source
nseling and guidance, WIN non-WIN.	6–10	A

APPENDIX C

SERVICE: FAMILY PLANNING

Social, educational, medical services to enable appropriate individuals including minors to limit voluntarily their family size, and to space their children, including services to assist in prevention of birth-out-of-wedlock and services to unmarried parents.

Code		Range Units
FPC	Counseling, referrals and follow-up.	8–14
*Contract		

SERVICE: HEALTH SERVICES GUIDANCE AND MEDIATION

Activities which assist individuals and families to identify, assess, and receive needed health services; prevention and treatment. Also mediation activities which include services as the consumer's advocate and maintaining good working relationships with providers.

Code		Range Units
HRG	Health guidance activities.	8–12
*Contract		

SERVICE: HOME MANAGEMENT—CONSUMER EDUCATION EXPERIENCE

Formal and informal instruction and training in management of household budgets, maintenance and care in the home, preparation of food, nutrition and consumer education, basic hygiene and health maintenance, coping with family life and group social settings, adjusting to age and/or disabiliting including payment for classes, groups, summer camps, etc.

PLANNING

ial, educational, medical services to enable appropriate individuals
uding minors to limit voluntarily their family size, and to space their
dren, including services to assist in prevention of birth-out-of-wedlock
services to unmarried parents.

	Range of Units	Source
nseling, referrals and follow-up.	8–14	A
		P

SERVICES GUIDANCE AND MEDIATION

vities which assist individuals and families to identify, assess, and
eive needed health services; prevention and treatment. Also mediation
vities which include services as the consumer's advocate and
ntaining good working relationships with providers.

	Range of Units	Source
lth guidance activities.	8–12	A
		P

MANAGEMENT—CONSUMER EDUCATION EXPERIENCE

nal and informal instruction and training in management of household
gets, maintenance and care in the home, preparation of food, nutrition
consumer education, basic hygiene and health maintenance, coping
family life and group social settings, adjusting to age and/or
biliting including payment for classes, groups, summer camps, etc.

Code		Range of Units
HCS	Activities which connect, supervise and follow-up the consumer in utilizing homemanagement resources outside the agency or purchased by contract.	6–16
HHE	Activities which assist the consumer to manage household resources.	10–14
HFC	Activities which assist the consumer to manage financial resources.	10–14
*HEP	Consumer education and experience payments.	

SERVICE: HOME MANAGEMENT—HOMEMAKER AND CHORE SERVICES

Chore services: The performance of household tasks, essential shopping, simple household repairs and other light work necessary to enable individuals to remain in their own homes when unable to perform such tasks themselves.

Homemaker services: Services to individuals, families in their own homes by trained homemaker to keep families together and keep individuals in their own homes by provision of services and training to the client.

Code		Range of Units
*HHM	Regular homemaker payment.	
*HHP	Short-term homemaker payment.	
*HLP	Long-term homemaker payment.	
*CSP	Chore service payment.	

	Range of Units	Source
s which connect, supervise and follow-up the consumer in utilizing anagement resources outside the agency or purchased by contract.	6–16	A
s which assist the consumer to manage household resources.	10–14	A
s which assist the consumer to manage financial resources.	10–14	A
er education and experience payments.		

NAGEMENT—HOMEMAKER AND CHORE SERVICES

ervices: The performance of household tasks, essential shopping, household repairs and other light work necessary to enable als to remain in their own homes when unable to perform such tasks lves.

aker services: Services to individuals, families in their own homes by homemaker to keep families together and keep individuals in their mes by provision of services and training to the client.

	Range of Units	Source
r homemaker payment.		P
erm homemaker payment.		P
rm homemaker payment.		P
ervice payment.		P

SERVICE: HOUSING—FINDING AND LANDLORD MEDIATION

Services which assist consumer to obtain or retain housing by credit arrangements, identifying code and zoning violations and regulations, assist consumer to locate housing and mediate tenant landlord relations.

Code		Range of Units
HIF	Activities which assist consumer to locate and retain suitable housing.	4–10

SERVICE: LEGAL SERVICES

Legal counseling and assistance including payments to private attorneys, payment of court costs such as guardianship and guardian-ad-litem proceedings, and purchase of legal services from private agencies.

Code		Range of Units
CRX	Activities which connect and supervise consumers receiving legal services.	6–14
*ALP	Court and legal cost payment for MR adult.	
*CLP	Child guardian-ad-litem payment (February 1976).	

SERVICE: PROTECTIVE SERVICES—ADULT

Services that will protect adults from abuse, neglect or exploitation to insure that no further harm will come to the adult. Includes investigation of complaints, home evaluation, referral for services, removal of the adult if needed, ongoing supervision, including activities to insure that the adults legal rights are protected.

-FINDING AND LANDLORD MEDIATION

which assist consumer to obtain or retain housing by credit
ments, identifying code and zoning violations and regulations, assist
er to locate housing and mediate tenant landlord relations.

	Range of Units	Source
s which assist consumer to locate and retain suitable housing.	4–10	A

RVICES

unseling and assistance including payments to private attorneys,
of court costs such as guardianship and guardian-ad-litem
ings, and purchase of legal services from private agencies.

	Range of Units	Source
s which connect and supervise consumers receiving legal services.	6–14	A
d legal cost payment for MR adult.		P
ardian-ad-litem payment (February 1976).		P

E SERVICES—ADULT

that will protect adults from abuse, neglect or exploitation to insure
urther harm will come to the adult. Includes investigation of
nts, home evaluation, referral for services, removal of the adult if
ongoing supervision, including activities to insure that the adults
hts are protected.

Code		Range of Units
PIA	Intervention, evaluation, referral, guidance and ongoing supervision of client.	8–14
*Contract	(February 1976)	

SERVICE: PROTECTIVE SERVICES—PROTECTIVE FINANCIAL ARRANGEMENTS

Services to protect financial interest of the individuals who because of mental or physical disfunctions are unable to manage their own resources including assessments to the agency for protective payees.

Code	Range of Units
PFA	4–12

SERVICE: PROTECTIVE SERVICES—CHILD INTERVENTION

Services that are necessary to protect a child from abuse, neglect, exploitation and to insure that no further harm will come to the child including investigation of complaints, home evaluation, referrals for services or removal of the child from the home if needed.

Code		Range of Units
PIC	Intervention, investigation, referral, initial court activities; shelter care supervision.	10–14

	Range of Units	Source
vention, evaluation, referral, guidance and ongoing supervision of t.	8–14	A
ruary 1976)		P

TIVE SERVICES—PROTECTIVE FINANCIAL ARRANGEMENTS

ces to protect financial interest of the individuals who because of al or physical disfunctions are unable to manage their own resources ding assessments to the agency for protective payees.

	Range of Units	Source
	4–12	A

TIVE SERVICES—CHILD INTERVENTION

ces that are necessary to protect a child from abuse, neglect, itation and to insure that no further harm will come to the child ding investigation of complaints, home evaluation, referrals for ces or removal of the child from the home if needed.

	Range of Units	Source
ention, investigation, referral, initial court activities; shelter care vision.	10–14	A

SERVICE: PROTECTIVE SERVICES—SUPERVISION

Services designed to oversee neglected, abused or exploited children in their own homes, to help the parent recognize the causes thereof, to help the parents strengthen their ability to provide acceptable care and to return runaway children to their homes.

Code		Range of Units
PSS	Supervision, counseling, follow-up; court activities.	10–20
PPR	Return and parole supervision of Industrial Schools students in the community.	
*TRP	Transportation payment for runaway children.	

SERVICE: PROTECTIVE SERVICES—CHILD SHELTER CARE

Temporary care and appropriate services provided in approved shelter care facilities for children who are waiting court action or transfer.

Code		Range of Units
*SCP	Shelter care payment.	
*SMP	Shelter Medical Payment.	
*SSP	Specialized Shelter Payment.	
*XCP	Shelter Clothing Payment.	

VE SERVICES—SUPERVISION

es designed to oversee neglected, abused or exploited children in wn homes, to help the parent recognize the causes thereof, to help rents strengthen their ability to provide acceptable care and to runaway children to their homes.

	Range of Units	Source
vision, counseling, follow-up; court activities.	10–20	A
and parole supervision of Industrial Schools students in the unity.		A
portation payment for runaway children.		P

VE SERVICES—CHILD SHELTER CARE

orary care and appropriate services provided in approved shelter care es for children who are waiting court action or transfer.

	Range of Units	Source
r care payment.		P
r Medical Payment.		P
alized Shelter Payment.		P
r Clothing Payment.		P

SERVICE: SUBSTITUTE CARE—ADULT

Activities which enable an individual to receive either temporary or permanent substitute care outside the home including pre-placement counseling, developing adequate substitute care arrangements, suprvision of the placement and assisting the individual to return to independent living, including provision of care and provision of room and board for a period of not more than six consecutive months as an integral but subordinate part of the service; transportation.

Code		**Range of Units**
SAF	Placement, supervision and consultation.	10–14
*AFP	Adult foster care payment.	
*HRP	Home of relative payment.	
*RFP	Group rehabilitative payment.	

SERVICE: SUBSTITUTE CARE—CHILD FOSTER

Activities which supervise and assist the placement and supervision of a child in foster care including those receiving assistance under the AFDC program. The service may include court activities and activities which aid the child in returning to his own home or adoption and provision of special services required because of a health condition, an emotional or behavioral problem and when appropriate documentation is provided that such services are needed.

CE: SUBSTITUTE CARE—ADULT

Activities which enable an individual to receive either temporary or permanent substitute care outside the home including pre-placement counseling, developing adequate substitute care arrangements, suprvision of the placement and assisting the individual to return to independent living, including provision of care and provision of room and board for a period of not more than six consecutive months as an integral but subordinate part of the service; transportation.

	Range of Units	Source
Placement, supervision and consultation.	10–14	A
Adult foster care payment.		P
Home of relative payment.		P
Group rehabilitative payment.		P

CE: SUBSTITUTE CARE—CHILD FOSTER

Activities which supervise and assist the placement and supervision of a child in foster care including those receiving assistance under the AFDC program. The service may include court activities and activities which aid the child in returning to his own home or adoption and provision of special services required because of a health condition, an emotional or behavioral problem and when appropriate documentation is provided that such services are needed.

Code		Range of Units
SCF	Placement, supervision of a child in foster care; court activities and return to the natural house.	16–30
*Contract		
SMF	Services to natural parents.	12–18
SIS	Independent living supervision.	16–20
*BFP	Behavioral foster care payment.	
*CFP	Child foster care payment.	
*EFP	Emergency foster care payment.	
*SFP	Specialized foster care payment.	
*TFP	Therapeutic foster care payment.	
*ICP	Initial clothing payment.	
*LEP	Lessons, equipment payment.	
*JSP	Joyous season payment.	
*STP	School, fees, costs payment.	

SERVICE: SUBSTITUTE CARE—CHILD GROUP

Activities which supervise, assist and coordinate placement supervision of children in group living situations and court activities which aid the child in returning to his own home, including provision of room and board for a period of not more than six consecutive months as an integral, but subordinate part of the service.

	Range of Units	Source
ement, supervision of a child in foster care; court activities and return e natural house.	16–30	A
		P
ices to natural parents.	12–18	A
pendent living supervision.	16–20	A
avioral foster care payment.		P
d foster care payment.		P
rgency foster care payment.		P
cialized foster care payment.		P
apeutic foster care payment.		P
l clothing payment.		P
ons, equipment payment.		P
us season payment.		P
ol, fees, costs payment.		P

UTE CARE—CHILD GROUP

vities which supervise, assist and coordinate placement supervision of
dren in group living situations and court activities which aid the child in
rning to his own home, including provision of room and board for a
od of not more than six consecutive months as an integral, but
rdinate part of the service.

Code		Range of Units
SCF	Child foster care supervision.	16–30
*Contract		
SMF	Services to natural parents.	12–18
SPR	Preparation and placement or return to the community to and from an institution.	6–12
*GHP	Group home payment.	
*RFP	Group rehabilitative payment.	
*ICP	Initial clothing payment.	
*LEP	Lessons, equipment payment.	
*JSP	Joyous season payment.	
*STP	School, fees and cost payment.	

SERVICE: REASSURANCE AND SUPPORT SERVICES

Activities that provide services either in the home or in other facilities to prevent premature institutionalization and to keep people in their own homes as long as possible, including food less than three meals per day that does not supplant basic nutritional needs.

Code		Range of Units
SRS	Home visits and follow-up.	2–10

	Range of Units	Source
/oster care supervision.	16–30	A
		P
:es to natural parents.	12–18	A
ration and placement or return to the community to and from an tion.	6–12	A
home payment.		P
rehabilitative payment.		P
clothing payment.		P
ns, equipment payment.		P
s season payment.		P
l, fees and cost payment.		P

ANCE AND SUPPORT SERVICES

ies that provide services either in the home or in other facilities to
nt premature institutionalization and to keep people in their own
as long as possible, including food less than three meals per day
oes not supplant basic nutritional needs.

	Range of Units	Source
visits and follow-up.	2–10	A, P

SERVICE: RECREATION AND SOCIALIZATION SERVICES

Activities and services which provide therapeutic, wholesome recreation, cultural experiences, and socialization to children and adults who ordinarily cannot find those opportunities on their own.

Code		Range of Units
RSP	Recreation/socialization payment.	2–10

SERVICE: TRANSPORTATION

Travel and related costs for eligible persons to obtain access to community facilities and resources.

Code		Range of Units
CRX	Connecting, assisting consumer in use of resource.	6–14
*NWP	Navajo works project transportation payment.	
*TRP	Transportation payment.	
*DEP	Drivers education payment (February 1976).	

SPECIAL CODES

*ANP	Authorized needs payment.

ION AND SOCIALIZATION SERVICES

ies and services which provide therapeutic, wholesome recreation,
l experiences, and socialization to children and adults who ordinarily
find those opportunities on their own.

	Range of Units	Source
ation/socialization payment.	2–10	P

RTATION

and related costs for eligible persons to obtain access to community
es and resources.

	Range of Units	Source
cting, assisting consumer in use of resource.	6–14	A
works project transportation payment.		P
ortation payment.		P
s education payment (February 1976).		P
rized needs payment.		P

APPENDIX D

SUMMARY SHEET FROM NEBRASKA CASE WORKER INSTRUCTION MANUAL

SERVICE CODES	SERVICE DESCRIPTION	UNIT	MAX. UNIT RATE	MAX. UN
0101	CHORE TASK	HOUR	$ 2.20	
0102	CHORE TASK	JOB	5.00	
0103	CHORE HOUSEKEEPER	HOUR	2.20	
0104	CHORE HOUSEKEEPER (LIVE-IN)	DAY	5.00	
0105	CHORE	½ HOUR	STAFF PROVIDED.	
0205	DAY CARE HOME OR CENTER	HOUR	$ 1.00	4 HRS./DAY
0206	DAY CARE HOME OF CENTER	DAY	7.50	
0207	DAY CARE HOME OR CENTER	WEEK	33.75	
0208	DAY CARE HOME OR CENTER	MONTH	142.00	
0301	IN-HOME CHILD CARE	HOUR	$ 2.00	4 HRS./DAY
0305	DAY CARE HOME	HOUR	1.00	4 HRS./DAY
0306	DAY CARE HOME	DAY	5.00	
0307	DAY CARE HOME	WEEK	27.50	
0308	DAY CARE HOME	MONTH	110.00	
0309	DAY CARE CENTER	HOUR	1.25	4 HRS./DAY
0310	DAY CARE CENTER	DAY	6.50	
0311	DAY CARE CENTER	WEEK	30.00	
0312	DAY CARE CENTER	MONTH	120.00	
0350	TRANSPORTATION (DAY CARE)	MILE	.16	
0351	TRANSPORTATION (DAY CARE)	TRIP O.W.	2.50	
0352	TRANSPORTATION (DAY CARE) BUS	TRIP O.W.	2.50	
0353	TRANSPORTATION (DAY CARE) TAXI	TRIP O.W.	2.50	
0354	TRANSPORTATION (DAY CARE)	½ HOUR	STAFF PROVIDED	

VICE DESCRIPTION	UNIT	MAX. UNIT RATE	MAX. UNITS/MONTH
SK	HOUR	$ 2.20	22
SK	JOB	5.00	9
USEKEEPER	HOUR	2.20	200
USEKEEPER (LIVE-IN)	DAY	5.00	31
	½ HOUR	STAFF PROVIDED	
HOME OR CENTER	HOUR	$ 1.00	4 HRS./DAY TO 29 da. per mo.
HOME OF CENTER	DAY	7.50	29
HOME OR CENTER	WEEK	33.75	5
HOME OR CENTER	MONTH	142.00	1
HILD CARE	HOUR	$ 2.00	4 HRS./DAY TO 29 da. per mo.
HOME	HOUR	1.00	4 HRS./DAY TO 29 da. per mo.
HOME	DAY	5.00	29
HOME	WEEK	27.50	5
HOME	MONTH	110.00	1
CENTER	HOUR	1.25	4 HRS./DAY TO 29 da. per mo.
CENTER	DAY	6.50	29
CENTER	WEEK	30.00	5
CENTER	MONTH	120.00	1
RTATION (DAY CARE)	MILE	.16	250
RTATION (DAY CARE)	TRIP O.W.	2.50	16
RTATION (DAY CARE) BUS	TRIP O.W.	2.50	16
RTATION (DAY CARE) TAXI	TRIP O.W.	2.50	16
RTATION (DAY CARE)	½ HOUR	STAFF PROVIDED	50

SERVICE CODES	SERVICE DESCRIPTION	UNIT	MAX. UNIT RATE	MAX. UN
0402	EPSDT	½ HOUR	STAFF PROVIDED	8
0450	TRANSPORTATION EPSDT	MILE	$ .16	250
0451	TRANSPORTATION EPSDT	TRIP O.W.	2.50	16
0452	TRANSPORTATION EPSDT (BUS)	TRIP O.W.	2.50	16
0453	TRANSPORTATION EPSDT (TAXI)	TRIP O.W.	2.50	16
0454	TRANSPORTATION EPSDT	½ HOUR	STAFF PROVIDED	32
0460	IN-HOME DAY CARE EPSDT	HOUR	1155.0503	4 HRS./DAY
0461	DAY CARE HOME EPSDT	HOUR	1.00	4 HRS./DAY
0462	DAY CARE CENTER EPSDT	HOUR	1.25	4 HRS./DAY
0502	DETERMINATION OF LEGAL STATUS	½ HOUR	STAFF PROVIDED	8
0503	PLACEMENT IN ADOPTIVE HOME	½ HOUR	STAFF PROVIDED	16
0504	SUPERVISION	½ HOUR	STAFF PROVIDED	8
0505	PREPARATION OF LEGAL DOC.	½ HOUR	STAFF PROVIDED	8
0510	AGREEMENT FOR SUBSIDY	½ HOUR	STAFF PROVIDED	8
0511	ANNUAL RE-APPLICATION PROCESS	½ HOUR	STAFF PROVIDED	4
0512	STATISTICAL REPORTING	½ HOUR	STAFF PROVIDED	4
0601	FAMILY PLANNING	½ HOUR	STAFF PROVIDED	8
0640	FAMILY PLANNING HOMEMAKER	HOUR	$ 2.25	16
0641	FAMILY PLANNING HOMEMAKER	½ HOUR	STAFF PROVIDED	32
0650	FAMILY PLANNING TRANSPORTATION	MILE	.16	250
0651	FAMILY PLANNING TRANSPORTATION	TRIP O.W.	2.50	
0652	FAMILY PLANNING TRANSPORTATION	TAXI O.W.	2.50	
0653	FAMILY PLANNING TRANSPORTATION	BUS O.W.	2.50	
0654	FAMILY PLANNING TRANSPORTATION	½ HOUR	STAFF PROVIDED	32
0660	FAMILY PLANNING IN-HOME DAY CARE	HOUR	1155.0503	4 HRS./DAY

RVICE DESCRIPTION	UNIT	MAX. UNIT RATE	MAX. UNITS/MONTH
	½ HOUR	STAFF PROVIDED	8/MO.
TATION EPSDT	MILE	$ .16	250/MO.
TATION EPSDT	TRIP O.W.	2.50	16/MO.
TATION EPSDT (BUS)	TRIP O.W.	2.50	16/MO.
TATION EPSDT (TAXI)	TRIP O.W.	2.50	16/MO.
TATION EPSDT	½ HOUR	STAFF PROVIDED	32/MO.
AY CARE EPSDT	HOUR	1155.0503	4 HRS./DAY to 4 da. per mo.
HOME EPSDT	HOUR	1.00	4 HRS./DAY to 4 da. per mo.
CENTER EPSDT	HOUR	1.25	4 HRS./DAY to 4 da. per mo.
ATION OF LEGAL STATUS	½ HOUR	STAFF PROVIDED	8/MO.
IT IN ADOPTIVE HOME	½ HOUR	STAFF PROVIDED	16/MO.
ON	½ HOUR	STAFF PROVIDED	8/MO.
ION OF LEGAL DOC.	½ HOUR	STAFF PROVIDED	8/MO.
NT FOR SUBSIDY	½ HOUR	STAFF PROVIDED	8/MO.
E-APPLICATION PROCESS	½ HOUR	STAFF PROVIDED	4/MO.
AL REPORTING	½ HOUR	STAFF PROVIDED	4/MO.
ANNING	½ HOUR	STAFF PROVIDED	8/MO.
ANNING HOMEMAKER	HOUR	$ 2.25	16/MO.
ANNING HOMEMAKER	½ HOUR	STAFF PROVIDED	32/MO.
ANNING TRANSPORTATION	MILE	.16	250/MO.
ANNING TRANSPORTATION	TRIP O.W.	2.50	8/MO.
ANNING TRANSPORTATION	TAXI O.W.	2.50	8/MO.
ANNING TRANSPORTATION	BUS O.W.	2.50	8/MO.
ANNING TRANSPORTATION	½ HOUR	STAFF PROVIDED	32/MO.
ANNING IN-HOME DAY CARE	HOUR	1155.0503	4 HRS./DAY to 4 da. per mo.

APPENDIX D

0661	FAMILY PLANNING DAY CARE HOME	HOUR	1.00	4 HRS./DAY
0662	FAMILY PLANNING DAY CARE CENTER	HOUR	1.25	4 HRS./DAY
0701	PLACEMENT IN FOSTER CARE	½ HOUR	STAFF PROVIDED	
0702	EVALUATION OF PLACEMENT	½ HOUR	STAFF PROVIDED	
0801	PLACEMENT IN FOSTER CARE	½ HOUR	STAFF PROVIDED	1
8002	SERVICES TO CHILD AWAITING PLACEMENT	½ HOUR	STAFF PROVIDED	
0803	SUPERVISION	½ HOUR	STAFF PROVIDED	
0804	WORKING WITH NATURAL PARENTS	½ HOUR	STAFF PROVIDED	
0805	ARRANGING FOR COURT ACTION	½ HOUR	STAFF PROVIDED	
0902	ALCOHOLISM SERVICES (BOARD & ROOM)	DAY	PROVIDER APPROVAL	30 DA. in a
0903	ALCOHOLISM SERVICES	DAY (8 HR)	PROVIDER APPROVAL	3
1001	CONGREGATE MEALS PREPARATION ONLY	MEAL	$ .75	
1002	DELIVERED MEALS PREPARATION & DELIVERY ONLY	MEAL	1.00	
1003	CONGREGATE OR DELIVERED MEALS FOOD COSTS	MEAL	.75	
1102	HOMEMAKER	HOUR	$ 2.25	
1103	HOMEMAKER	HOUR	2.25	
1104	HOMEMAKER	½ HOUR	STAFF PROVIDED	
1105	HOMEMAKER	½ HOUR	STAFF PROVIDED	

PLANNING DAY CARE HOME	HOUR	1.00	4 HRS./DAY to 4 da. per mo.
PLANNING DAY CARE CENTER	HOUR	1.25	4 HRS./DAY to 4 da. per mo.
ENT IN FOSTER CARE	½ HOUR	STAFF PROVIDED	8/MO.
TION OF PLACEMENT	½ HOUR	STAFF PROVIDED	8/MO.
ENT IN FOSTER CARE	½ HOUR	STAFF PROVIDED	16/MO.
ES TO CHILD AWAITING EMENT	½ HOUR	STAFF PROVIDED	8/MO.
ISION	½ HOUR	STAFF PROVIDED	8/MO.
G WITH NATURAL PARENTS	½ HOUR	STAFF PROVIDED	8/MO.
SING FOR COURT ACTION	½ HOUR	STAFF PROVIDED	8/MO.
OLISM SERVICES RD & ROOM)	DAY	PROVIDER APPROVAL	30 DA. in any 6 MO. period
OLISM SERVICES	DAY (8 HR)	PROVIDER APPROVAL	31/MO.
EGATE MEALS ARATION ONLY	MEAL	$ .75	23
RED MEALS ARATION & DELIVERY ONLY	MEAL	1.00	23
EGATE OR DELIVERED MEALS COSTS	MEAL	.75	23
AKER	HOUR	$ 2.25	65
AKER	HOUR	2.25	65
AKER	½ HOUR	STAFF PROVIDED	130
AKER	½ HOUR	STAFF PROVIDED	130

SERVICE CODES	SERVICE DESCRIPTION	UNIT	MAX. UNIT RATE	MAX. UNI
1302	HOME EVALUATION	½ HOUR	STAFF PROVIDED	16
1303	SUPERVISION OF CHILD IN PLACEMENT	½ HOUR	STAFF PROVIDED	8
1304	REPORTS TO OUT OF STATE AGENCY	½ HOUR	STAFF PROVIDED	8
1305	ARRANGEMENTS FOR RETURN OF CHILD	½ HOUR	STAFF PROVIDED	4
1501	PROTECTIVE SERVICES	½ HOUR	STAFF PROVIDED	16
1601	PROTECTIVE SERVICES INVESTIGATION	½ HOUR	STAFF PROVIDED	16
1602	WORKING WITH NATURAL PARENTS	½ HOUR	STAFF PROVIDED	8
1603	ARRANGING FAMILY STRENTHENING SVCS.	½ HOUR	STAFF PROVIDED	8
1604	ARRANGING FOR COURT ACTION	½ HOUR	STAFF PROVIDED	8
1805	TRANSPORTATION	MILE	$ .16	2
1806	TRANSPORTATION	TRIP	2.50	
1807	TRANSPORTATION—BUS	TRIP O.W.	2.50	
1808	TRANSPORTATION—TAXI	TRIP O.W.	2.50	
1809	TRANSPORTATION	½ HOUR O.W.	STAFF PROVIDED	
1903	PRE-SCHOOL EDUCATIONAL SERVICES	DAY 4 hrs.	$ 17.64	23
1913	SKILLS TRAINING	FACE TO FACE CONTRACT 1 hr. OR MORE PER DAY WITH CLIENT	38.75	12

RVICE DESCRIPTION	UNIT	MAX. UNIT RATE	MAX. UNITS/MONTH
LUATION	½ HOUR	STAFF PROVIDED	16/MO.
ON OF CHILD IN ENT	½ HOUR	STAFF PROVIDED	8/MO.
TO OUT OF STATE AGENCY	½ HOUR	STAFF PROVIDED	8/MO.
MENTS FOR RETURN OF	½ HOUR	STAFF PROVIDED	4/MO.
VE SERVICES	½ HOUR	STAFF PROVIDED	16/MO.
VE SERVICES			
GATION	½ HOUR	STAFF PROVIDED	16/MO.
WITH NATURAL PARENTS	½ HOUR	STAFF PROVIDED	8/MO.
G FAMILY HENING SVCS.	½ HOUR	STAFF PROVIDED	8/MO.
G FOR COURT ACTION	½ HOUR	STAFF PROVIDED	8/MO.
RTATION	MILE	$ .16	250
RTATION	TRIP	2.50	16
RTATION—BUS	TRIP O.W.	2.50	16
RTATION—TAXI	TRIP O.W.	2.50	16
RTATION	½ HOUR O.W.	STAFF PROVIDED	75
OL EDUCATIONAL SERVICES	DAY 4 hrs.	$ 17.64	23/MO.
AINING	FACE TO FACE CONTRACT 1 hr. OR MORE PER DAY WITH CLIENT	38.75	12/MO.

APPENDIX D

APPENDIX E

DEPARTMENT OF MENTAL HEALTH
MANAGEMENT INFORMATION SYSTEM

DEFINITION OF TREATMENT UNITS

Below are defined all the Treatment Units used throughout the Orange County Department of Mental Health system. In some cases these treatment units are utilized only by particular reporting units. This is indicated by listing the reporting unit number in parenthesis after the definition of the treatment units.

INPATIENT DAYS 90

Inpatient day denotes any treatment regimen involving 24-hour care. This code is used when the treatment modality is considered to be the ward milieu.

METHADONE MAINTENANCE PROGRAM 91, 92, 93

The Methadone Maintenance Program denotes the administering to hard-core heroin addicts of daily doses of Methadone on a maintenance dosage regimen. It includes medical coverage and nursing staff for evaluating patients initially and periodically, the dispensing of medication, and urine monitoring for a battery of drugs. Patients may be in the program on a 2-day (91), a 5-day (92), or 7-day (93) basis.

PSYCHIATRIC DAY TREATMENT 94, 95, 96, 97, 98

Psychiatric Day Treatment denotes any treatment regimen involving more than 4 or less than 24 hours of intensive services. This code is used when the treatment modality is considered to be the ward milieu. Psychiatric Day Treatment may be for 1-to-5 days a week. Code 94—1 day a week; 95—2 days a week; 96—3 days a week; 97—4 days a week; and 98—5 days a week.

ORIENTATION 01

Orientation denotes a meeting with prospective patients and/or parents—

individually or in groups—to explain the services, expectations placed upon those receiving services, fees, policies, and the like. It is a part of the intake-evaluation process.

TRIAGE 02

Triage denotes an interview, frequently brief, for the purpose of determining the service to which a patient should be assigned initially. It is *not* necessarily a final or definitive evaluation for determining patient treatment needs.

INTAKE & EVALUATION (CSS/DSS ONLY) 03

This category is to be used to denote the evaluation of clients for placement, social service follow-up and/or clinical services in the office or in the field as part of continuing care services. This item is to be used only by the Department of Social Services and/or the Community Services Section staff.

INTAKE OR PSYCHIATRIC EXAMINATION 04

Intake/Psychiatric Examination denotes an in-depth evaluation of the patient to determine his treatment needs in order that the appropriate disposition can be made. Such an evaluation should be coded in this block regardless of the discipline of the professional performing the evaluation. The discipline of the professional is recorded in Item 7 on the Services Rendered document and Item 10 on the Evaluation document.

PSYCHOLOGICAL TESTING (PATIENT) 05

Psychological Testing denotes the use of a single psychological test or battery of tests for diagnostic purposes. These might include IQ, projective, organicity tests and the like. The duration of the testing session is recorded in Item 10 on the Services Rendered document.

For example, several tests might be administered to the patient which required a total of four hours. This time length would be coded in "Session Length" (Item 10).

VOCATIONAL REHABILITATION EVALUATION 06

Vocational Rehabilitation Evaluation denotes interview time spent by a Vocational Rehabilitation Counselor or a Vocational Rehabilitation Secretary in evaluating whether a patient applying for vocational rehabilitation services qualifies for such services according to state guidelines. This code is no longer applicable once a patient has been accepted for vocational rehabilitation.

PSYCHOLOGICAL COURT EXAMINATION 07

Psychological Court Examination denotes a psychiatric evaluation, not unlike the Intake/Psychiatric, but performed on court order and addressing itself to specific problems or questions raised in connection with the patient's legal situation.

CONSERVATORSHIP EVALUATION 08

Conservatorship Evaluation denotes the specific legal situation wherein a person is judged gravely disabled by reason of mental disorder or chronic alcoholism by the staff or chief of the mental health facility. Such a judgment is made as a result of a 14-day period of intensive care after which a comprehensive evaluation is made to determine if in fact the person is gravely disabled as defined by the Welfare and Institutions Code. The purpose of this examination is to determine whether the disability caused by mental disorder or chronic alcoholism requires that the individual be placed under conservatorship.

PREPETITION SCREENING 09

Prepetition Screening denotes a specific procedure mandated by the Laterman-Petris-Short Act. A reporting unit staff member or members interviews a person described as being in need of psychiatric care because he is a danger to himself, a danger to others or because he is gravely disabled. The staff member interviews the patient to verify the allegations and to persuade the patient to seek help voluntarily if it is necessary.

PHYSICAL EXAMINATION 10

Physical Examination denotes a medical history and physical examination performed as part of the patient's general evaluation.

LABORATORY TESTS 11

Laboratory test denotes any chemical or physical analysis of patient specimens. (Example: urinanalysis, C.B.C., etc.)

CONTINUING CARE CASE REVIEW 12

This category is used to denote review of continuing care cases utilizing either chart review or follow-up contact with the patient or facility providing care for the patient.

CRISIS INTERVENTION 23

Crisis Intervention denotes a specific form of therapeutic intervention designed to assist a patient to deal more effectively with his current crisis and to improve his ability to resolve such crises in the future. Crisis Intervention refers to services rendered in the office or field.

INDIVIDUAL THERAPY 24

Individual Therapy denotes an individual therapist's work in his office or clinic with an individual patient for the purpose of resolving the patient's emotional difficulties.

CHEMOTHERAPY 25

Chemotherapy denotes a visit between patient and doctor. The purpose of this is to place the patient on psycho-active medications and/or to evaluate their effectiveness.

BIO-FEEDBACK THERAPY 26

This category denotes treatment delivered utilizing electronic "Bio-feedback" equipment.

VOCATIONAL REHABILITATION COUNSELING 27

Vocational Rehabilitation Counseling is used to denote a Vocational Rehabilitation Counselor's work with an individual patient for the purpose of designing and fulfilling a vocational rehabilitation program. This code should only be used for actual time spent with a patient and not for other vocational rehabilitation associated activities.

VITAMIN THERAPY 28

Use this category to indicate a brief appointment with the patient to administer vitamins and discuss his or her progress in treatment.

ANTABUSE EVALUATION 29

Antabuse (disulfiram) Evaluation refers to medical and interview evaluation services rendered in the course of determining whether or not a patient is an acceptable candidate for treatment with Antabuse. Once the decision to accept a patient for Antabuse therapy has been made, follow-up visits for monitoring and renewed supply of medication should be coded under Chemotherapy (25).

COORDINATION INTERVIEW 30

This category denotes a brief interview with the patient oriented toward obtaining information necessary to evaluate the progress of the patient toward meeting treatment plan objectives.

PATIENT FOLLOW-UP 31

Patient Follow-up denotes a single patient visit or small number of visits to the office or clinic in order to follow up on a crisis intervention or other psychotherapeutic effort. Recording a visit in this category implies that the therapist does not intend to establish a longer-term therapeutic contract with the patient but is only trying to help him consolidate gains from previous treatment or to obtain follow-up data for the therapist's own information.

ANTABUSE FOLLOW-UP 32

Antabuse follow-up includes a review and discussion of the patient's current use of Antabuse, including any questions arising from its use and any reported side effects. Additional Antabuse is also dispensed.

CHEMOTHERAPY FOLLOW-UP 33

Chemotherapy follow-up denotes a follow up visit to check on a patient's psychoactive medication needs and to prescribe or deliver medications as necessary.

ALCOHOLISM ASSESSMENT AND WITHDRAWAL 34

This includes both a review of the patient's past medical history with emphasis on alcohol related disorders and an evaluation of current medical problems including alcohol related disorders. All vital signs are checked and medication is dispensed as ordered by the physician.

INDIVIDUAL SERVICE (CSS/DSS ONLY) 35

This item is to be used to indicate clinical and/or non-clinical services as part of continuing care services by the Department of Social Services and/or the Community Services Section staff. Services might include pre-placement, placement, individual counseling, etc.

SOCIAL SERVICE COUNSELING 36

Denotes a type of counseling which focuses on the patient's social, employment, and economic problems and frequently includes referrals to other agencies.

GROUP THERAPY 45

Group Therapy denotes a group composed exclusively of identified patients together with a therapist or therapists. It does not include groups composed of patients and nonpatients. The size of the group may vary. Each identified patient must have an individual services rendered document completed inasmuch as this document is the only form used for services rendered.

MULTIPLE FAMILY THERAPY 46

Multiple Family Therapy denotes a form of group therapy involving more than one identified patient and more than one family unit. The distinction between this therapy and other group therapies is its focus on the functioning of two or more family units. Separate services rendered documents must be completed on each identified patient or family.

COUPLES GROUP THERAPY 47

Couples Group Therapy denotes group therapy involving several couples of marital peers or several couples having close personal relationships of an ongoing nature. At least one member of each couple is an identified patient. Frequently both parties in each couple may be identified patients. In any case, all identified patients are listed on the services rendered document.

GROUP CRISIS INTERVENTION 48

Group Crisis Intervention denotes group therapy used to deal with acute immediate crises in the participants' lives. Groups of this nature are frequently open ended and fluctuating in membership. Patients are expected by therapists to remain in such groups for a relatively brief period of time.

PC 1000 SEMINAR 49

This item is to be used to denote legal and medical seminars held as part of the drug teams PC 1000 program. These sessions are conducted by lawyers and doctors on the legal and medical ramifications of drug usage and involvement. At each session, a drug abuse team member is present to organize the activity and facilitate subsequent discussion.

KINDERGARTEN GROUP 50

Kindergarten Group denotes a group therapy program conducted by a therapist or teacher for students in kindergarten who might otherwise need a therapeutic nursery school program. It is specifically geared to this age group and its interests.

LATENCY GROUP 51

Latency Group denotes a children's program of group therapy conducted with latency age children. Each child in such a group should be an identified patient and should be so recorded on the services rendered documents.

COURT GROUP 52

This category is used to denote elementary group therapy and education related to alcohol abuse and traffic safety.

ADOLESCENT GROUP 53

Adolescent Group denotes the children's program for group therapy conducted with adolescent children. Each child in such a group should be an identified patient and should be so recorded on the services rendered document.

CHILDREN'S GROUP 54

Children's Group denotes therapy administered in groups of children wherein a wide range of ages is represented and wherein each child is an identified patient. It is used where the designations 51 and 53 are not appropriate for a given treatment setting. It is less age specific than these and should be used for any mixed age group of children.

INTENSIVE CARE CLINIC (CHILDREN) 55

Intensive Care Clinic denotes a specific treatment utilized by the South Orange County Child Guidance Clinic. It is a mixture of individual and group therapy for children which usually runs concurrently with the intensive care clinic (parents) designated as 74 below.

ACTIVITIES PROGRAMS, VARIABLE LENGTH, INTERMITTENT 56

This code is used in those instances where a patient is attending an activities program, partial hospitalization service, social learning center, et cetera, on an attendance basis other than those accounted for by the regular partial hospitalization codes. The length of attendance is recorded in Item 10 on the services rendered document, one of which must be submitted for each visit.

ORIENTATION GROUP 57

This category denotes a meeting with patients and/or parents in groups to explain the services, expectations placed upon those receiving services, fees, policies, etc. It is part of the intake-evaluation process.

FAMILY THERAPY 64

Family Therapy denotes the treatment of a *single* family as a unit including children, parents and/or extended family as necessary. More than one therapist might be involved in such single family treatment. The focus of therapy is on the functioning of the entire family unit. However, for the purpose of billing and recording services rendered, a single financially responsible individual is identified—frequently the member who first sought treatment, on whom the entry and evaluation document has been completed and on whom a discharge document will be completed at the termination of treatment. If more than one member of the family is a registered patient of the RU, all registered can be recorded as patients and the services rendered document could be utilized. This procedure would result in separate charges and separate treatment unit credits.

NETWORK THERAPY 65

Network Therapy denotes a variant of group/family methods in which the social network of the patient is engaged in treatment. The patient's network may be treated either in parts or as a whole including all members, family, relatives, friends, and other work or neighbor relations.

COUPLE THERAPY 66

Couple Therapy denotes treatment for two individuals who are in close personal relationship. The focus of the therapy is upon their interrelationship and only one couple is involved with a given therapist or therapists. Either or both parties in the couple may be identified patients. However, identified patients are listed on the services rendered document.

PARENT CHILD CLINIC 67

Parent Child Clinic denotes specific services provided at the Reporting

Unit to parents who have been legally convicted of child battering and have subsequent difficulties disciplining their children. Designation of a service under this code includes both an in-depth evaluation and/or subsequent therapy using all relative modalities. These services are provided on an outpatient basis.

GROUP OF PARENTS 73

Group of Parents denotes treatment involving groups of parents which exclude the identified patients—the children. Usually, none of the participants in such groups are identified patients. Consequently the cost or credit for this treatment are accrued through the identified patients. That is, instead of listing the names of the parents on individual services rendered documents, the names of their identified patient children are listed. This procedure is compatible with the focus of these groups which is to enable the parents to be more effective in handling their children or in coping with the child's emotional illness.

INTENSIVE CARE CLINIC (PARENTS) 74

As mentioned above under 55, Intensive Care Clinic (Parents) denotes a group program for parents which runs concurrently with the intensive care clinic for children. Treatment unit credits are listed on individual services rendered documents under the names of identified patients, i.e., the children.

COLLATERAL INTERVIEW 75

Collateral Interview denotes an interview with any significant other conducted without the patient being present. The name of the identified patient is entered on the services rendered documents, although he is not present during the interview.

GROUP WITH OTHER FAMILY MEMBERS 76

Group with Other Family Members denotes cases where parents, other family members or combinations thereof (i.e., several sets of parents or several sets of siblings) are seen by a therapist on a group basis but the identified patient is *excluded* from the group. The names of the identified patients are entered on services rendered documents rather than the names of family members actually in the group's membership.

INDIVIDUAL THERAPY COLLATERAL 77

Individual Therapy Collateral denotes therapy with parents or other family members where the focus is upon improving the living conditions of the identified patient (e.g., working with a neurotic mother to improve the home situation of an identified child patient). This designation is used only where the person in therapy as a collateral is not himself an identified patient. Individual Therapy Collateral also differs from a collateral interview in that the former delves into the emotional problems of the interviewee and is usually an ongoing process rather than a one time only interview.

CRISIS INTERVENTION (COLLATERAL) 78

Crisis intervention collateral denotes an effort to work with a collateral person to assist in the resolution of a crisis in the identified patient. This designation is used for office or field visits.

CONSULTATION FOR PATIENT 79

Consultation for Patient denotes those situations where the therapist or a member of the therapeutic team makes contact with some agency, individual or other person unrelated to the patient on his behalf in order to learn more about the patient's history, or to bring about some structural change in the patient's environment advantageous to him. The cost incurred and the treatment units accrued are credited to the patient's therapy.

PSYCHOLOGICAL TESTING (COLLATERAL) 80

Psychological Testing (Collateral) denotes those situations where a significant Other in the patient's life is thought to be in need of psychological testing in order to better diagnose and/or manage the identified patient. For example, in many cases involving disturbed children, a careful parental evaluation is essential. Psychological testing used in such an evaluation of the parent(s) would receive this designation.

APPENDIX F

SAMPLE REPORTS FROM MULTI-STATE INFORMATION SYSTEM

PATIENT ADMISSION NOTE: CASE NUMBER 123456

Name	**Stewart, Nancy**
N.Y. State ID Number	**1462167**
Social Security Number	**123-45-6789**

**** PERSONAL DATA ****

(AS OF: 01/03/72)

USUAL ADDRESS	123 QUINN STREET, ORANGEBURG, N.Y.
HOME RESIDENCE CODE	987654
CATCHMENT AREA	XY
ENVIRONMENT	CITY/VILLAGE
DATE OF BIRTH	12/01/47
AGE	24
SEX	FEMALE
ETHNIC GROUP	WHITE
CITIZENSHIP	U.S.
RELIGION	PROTESTANT
MARITAL STATUS	NEVER MARRIED
EDUCATIONAL LEVEL	COMPLETED ONE YEAR COLLEGE
OCCUPATIONAL CATEGORY	SEMI-SKILLED
EMPLOYMENT STATUS	EMPLOYED
WEEKLY FAMILY INCOME—NET	$300 OR OVER
NUMBER OF PERSONS ON INCOME	5
HOUSEHOLD COMPOSITION	LIVES WITH PARENTS, WITH SIBLINGS

**** ADMISSION DATA ****

DATE OF CURRENT ADMISSION	01/03/72
ACTION CODE ON CURRENT ADMISSION FORM (MSIS-5)	ADMISSION
STATUS ON ADMISSION	OUTPATIENT-EMERGENCY
REFERRED BY	SELF
LAST SERVICE WAS AS AN	OTHER THAN INPATIENT
LAST PSYCHIATRIC OR RETARDATION FACILITY OR SERVICE WAS	ROCKLAND COUNTY COMM. M.H.C.
TIME SINCE LAST SERVICE	OVER ONE YEAR
PRIOR PSYCHIATRIC OR RETARDATION FACILITY OR SERVICE OTHER THAN INPATIENT	MENTAL HEALTH CENTER, PRIVATE THERAPIST (OTHER THAN PSYCHIATRIST)

**** PROBLEM APPRAISAL DATA ****

(AS OF: 01/03/72)

INTELLECTUAL DEVELOPMENT	BRIGHT
PRESENTING PROBLEMS	SLEEPING SOCIAL RELATIONS DISTURBANCE WITH FAMILY OTHER THAN THE IMMEDIATE AND WITH OTHER PEOPLE SOCIAL PERFORMANCE DISTURBANCE—JOB DAILY ROUTINE AND LEISURE TIME IMPAIRMENT SUICIDAL THOUGHTS DEPRESSED MOOD, INFERIORITY SOCIAL WITHDRAWAL, ISOLATION SUSPICION, PERSECUTION DELUSIONS HALLUCINATIONS ANGER, BELIGERENCE, NEGATIVISM SEXUAL PROBLEMS DRUG ABUSE SPEECH DISORGANIZATION, INCOHERENCE INAPPROP. AFFECT, APPEARANCE, BEHAVIOR
PROBLEM DURATION	LESS THAN 1 YEAR
OVERALL SEVERITY OF CONDITION	SLIGHT

PATIENT SUMMARY OF DIRECT SERVICE RECEIVED

FROM: JAN. 3, 1972 TO: JUNE 1, 1972

Patient Name: Stewart, Nancy
Case Number: 123456

DATE OF CONTRACT	TYPE OF SERVICE	TIME SPENT HR:MIN	CONTACT CLINICIAN	UNIT RENDERING SERVICE	IN DIS
01/03/72	CRISIS INTERVEN.	2:00	7—M. BROWN	OUTPATIENT CLINIC	HOLD
01/03/72	MEDICATION (CHEMOTHERAPY)	:05	7—M. BROWN	OUTPATIENT CLINIC	HOLD
01/10/72	PSYCHIATRIC, PSYCHOLOGICAL AND SOCIAL EVAL.	2:30	7—M. BROWN	OUTPATIENT CLINIC	HOLD
01/15/72	INDIVIDUAL THERAPY	1:15	7—M. BROWN	OUTPATIENT CLINIC	HOLD
02/06/72	CRISIS INTERVEN.	1:00	9—L. PARK	OUTPATIENT CLINIC	REFER T UNIT
02/06/72	MEDICATION (CHEMOTHERAPY)	:05	4—G. LORNE	WARD 215	HOLD
02/25/72	INPATIENT CARE		6—F. POUND	WARD 215	HOLD
03/02/72	GROUP THERAPY	1:00	6—F. POUND	WARD 215	HOLD
03/06/72	MEDICATION (CHEMOTHERAPY)	:05	4—G. LORNE	WARD 215	HOLD
03/20/72	INDIVIDUAL THERAPY	1:00	4—G. LORNE	WARD 215	HOLD
04/01/72	MEDICATION (CHEMOTHERAPY)	:05	4—G. LORNE	WARD 215	REFER T CLINIC
04/07/72	INDIVIDUAL THERAPY	1:00	2—P. FITCH	OUTPATIENT CLINIC	HOLD
04/25/72	MEDICATION (CHEMOTHERAPY)	:05	2—P. FITCH	OUTPATIENT CLINIC	HOLD
05/15/72	MEDICATION (CHEMOTHERAPY)	:10	2—P. FITCH	OUTPATIENT CLINIC	HOLD
06/01/72	INDIVIDUAL THERAPY	1:05	2—P. FITCH	OUTPATIENT CLINIC	DISCONT

PATIENT SUMMARY OF DIRECT SERVICE RECEIVED

FROM: JAN. 3, 1972 TO: JUNE 1, 1972

vart, Nancy
456

TYPE OF SERVICE	TIME SPENT HR:MIN	CONTACT CLINICIAN	UNIT RENDERING SERVICE	INTENDED DISPOSITION
IS INTERVEN.	2:00	7—M. BROWN	OUTPATIENT CLINIC	HOLD
ICATION EMOTHERAPY)	:05	7—M. BROWN	OUTPATIENT CLINIC	HOLD
CHIATRIC, CHOLOGICAL AND IAL EVAL.	2:30	7—M. BROWN	OUTPATIENT CLINIC	HOLD
VIDUAL THERAPY	1:15	7—M. BROWN	OUTPATIENT CLINIC	HOLD
IS INTERVEN.	1:00	9—L. PARK	OUTPATIENT CLINIC	REFER TO INPATIENT UNIT
ICATION EMOTHERAPY)	:05	4—G. LORNE	WARD 215	HOLD
TIENT CARE		6—F. POUND	WARD 215	HOLD
UP THERAPY	1:00	6—F. POUND	WARD 215	HOLD
ICATION EMOTHERAPY)	:05	4—G. LORNE	WARD 215	HOLD
VIDUAL THERAPY	1:00	4—G. LORNE	WARD 215	HOLD
ICATION EMOTHERAPY)	:05	4—G. LORNE	WARD 215	REFER TO OUTPATIENT CLINIC
VIDUAL THERAPY	1:00	2—P. FITCH	OUTPATIENT CLINIC	HOLD
ICATION EMOTHERAPY)	:05	2—P. FITCH	OUTPATIENT CLINIC	HOLD
ICATION EMOTHERAPY)	:10	2—P. FITCH	OUTPATIENT CLINIC	HOLD
VIDUAL THERAPY	1:05	2—P. FITCH	OUTPATIENT CLINIC	DISCONTINUE SERVICE

APPENDIX F

MONTH: March, 1976

TYPE OF SERVICE

Clinician Type	Intake	Indiv. Psych.	Group, etc.	TOTAL
Psych.	100(1) 2000(2)			
Psychol.				
Nurses				
S.W.				
Psych. Aides				
Med Students				
Others				
TOTAL				

Key 1 = Number of Contacts
Key 2 = Total Time Spent In Minutes (Could be Converted to Hrs.)

MSIS STARGEN OUTPUT

NUMBER OF CONTACTS (RAW) AND TOTAL TIME SPENT (WT1) IN EACH TY
SERVICE RENDERED BY CLINICIAN FROM 1/01/72–6/01/72

TOTAL TIME (MINUTES)
SPENT DURING = WT1
CONTACTS ENTRY

ROWS = CMHC CLINICIANS **COLUMNS = CMHC TYPE OF SERVICE**

	INITIAL INTER	PSYCH EVAL	INDIV THERAPY	GROUP THERAPY	FAMILY THERAPY	COUPLE THERAPY	DRUG THERAPY	FAMGRP THERAPY	CCPGRP THERAPY	OTHERS	DB ANDM
L. JONES	6 290.00	2 68.00	173 8190.00	326 3825.90	1 50.00	6 240.00	8 160.00			2 120.00	10 305.00
J. DOE	5 300.00	1 45.00	215 11195.00	124 2325.60	56 2975.00	30 1740.00			1 14.40	2 90.00	13 524.40
L. SACK		2 35.00	2 130.00								
P. POST		1 10.00	43 2070.00	10 98.00	2 100.00	3 150.00					
R. FINK	4 200.00	1 40.00	167 7900.00	94 1457.50	11 520.00	8 390.00			14 158.40		6 180.00
J. LOGAN			52 2575.00	38 495.00		1 50.00	1 15.00				
H. REED	2 100.00		226 10049.10	55 957.90	3 160.00	15 600.70		1 16.50			4 150.00
A. SMITH	5 265.00		170 6955.00	145 2363.10	6 360.00	8 460.00					9 297.50
K. LINK			50 2325.00	18 337.20	4 200.00	2 40.00					
S. ROSS	1 60.00		28 1230.00	152 1792.80		13 399.80			4 60.00	1 45.00	2 90.00
COLUMN SUMS	23 1215.00	7 198.00	1126 52619.00	962 13653.00	83 4365.00	86 4070.50	9 175.00	1 16.50	19 232.80	5 255.00	44 1546.90

T

R OF CONTACTS (RAW) AND TOTAL TIME SPENT (WT1) IN EACH TYPE OF SERVICE RENDERED BY CLINICIAN FROM 1/01/72–6/01/72

UTES)
RING = WT1
ACTS ENTRY

IANS COLUMNS = CMHC TYPE OF SERVICE

PSYCH EVAL	INDIV THERAPY	GROUP THERAPY	FAMILY THERAPY	COUPLE THERAPY	DRUG THERAPY	FAMGRP THERAPY	CCPGRP THERAPY	OTHERS	DB ANDM	ROW SUMS	KEY
2	173	326	1	6	8			2	10	534	RAW
68.00	8190.00	3825.90	50.00	240.00	160.00			120.00	305.00	13248.90	WT1
1	215	124	56	30			1	2	13	447	RAW
45.00	11195.00	2325.60	2975.00	1740.00			14.40	90.00	524.40	19209.40	WT1
2	2									4	RAW
35.00	130.00									165.00	WT1
1	43	10	2	3						59	RAW
10.00	2070.00	98.00	100.00	150.00						2418.00	WT1
1	167	94	11	8			14		6	305	RAW
40.00	7900.00	1457.50	520.00	390.00			158.40		180.00	1084[illegible].90	WT1
	52	38		1	1					92	RAW
	2575.00	495.00		50.00	15.00					3135.00	WT1
	226	55	3	15		1			4	306	RAW
	10049.10	957.90	160.00	600.70		16.50			150.00	12034.20	WT1
	170	145	6	8					9	343	RAW
	6955.00	2363.10	360.00	460.00					297.50	10700.60	WT1
	50	18	4	2						74	RAW
	2325.00	337.20	200.00	40.00						2902.20	WT1
	28	152		13			4	1	2	201	RAW
	1230.00	1792.80		399.80			60.00	45.00	90.00	3677.60	WT1
7	1126	962	83	86	9	1	19	5	44	2365	RAW
198.00	52619.00	13653.00	4365.00	4070.50	175.00	16.50	232.80	255.00	1546.90	78336.80	WT1

APPENDIX F

MSIS STARGEN OUTPUT

TYPE OF SERVICE RENDERED BY UNIT RENDERING SERVICE FOR APPOINTMENTS THAT WERE KEPT 4/01/72–5/01/72

ROWS = CMHC TYPE OF SERVICE
COLUMNS = CMHC SERVICE UNITS

	HOGAN	RYAN	BROOM	BEDFORD	RHODES	LOVELL	ROGERS	BROOKS	PREEN	STEIN	CHARLES	DB ANOM
INITIAL INTER	221 98.222 64.620		1 0.444 0.140								3 1.333 8.108	
PSYCH EVAL	107 93.860 31.287	4 3.509 1.351	1 0.877 0.143									2 1.754 40.000
INDIV THERAPY	3 0.283 0.877	226 21.341 76.351	504 47.592 72.310	50 4.721 32.258	24 2.266 66.667	31 2.927 63.265	15 1.416 5.119	29 2.738 27.619	168 15.864 43.979	7 0.661 7.071		2 0.189 40.000
GROUP THERAPY		42 6.432 14.189	173 26.493 24.821	94 14.395 60.645		9 1.378 18.367	74 11.332 25.256	6 0.919 5.714	178 27.259 46.597	76 11.639 76.768		1 0.153 20.000
FAMILY THERAPY			1 1.923 0.143		2 3.846 5.556	9 17.308 18.367	23 44.231 7.850	1 1.923 0.952	16 30.769 4.188			
COUPLE THERAPY	11 12.360 3.216	24 26.966 8.108	13 14.607 1.865	7 7.865 4.516	9 10.112 25.000		12 13.483 4.096		13 14.607 3.403			
DRUG THERAPY			1 1.639 0.143	4 6.557 2.581					7 11.475 1.832	15 24.590 15.152	34 55.738 91.892	
FAMILY GROUP THERAPY					1 100.000 2.778							
COLUMN SUMS	342 15.16 100.00	296 13.12 100.00	694 30.76 100.00	155 6.87 100.00	36 1.60 100.00	49 2.17 100.00	124 5.50 100.00	38 1.68 100.00	382 16.93 100.00	98 4.34 100.00	37 1.64 100.00	5 .22 100.00

TYPE OF SERVICE RENDERED BY UNIT RENDERING SERVICE FOR APPOINTMENTS THAT WERE KEPT 4/01/72–5/01/72

SERVICE
CE UNITS

RYAN	BROOM	BEDFORD	RHODES	LOVELL	ROGERS	BROOKS	PREEN	STEIN	CHARLES	DB ANOM	ROW SUMS	KEY
	1								3		225	RAW
	0.444								1.333		100.000	RPR
	0.140								8.108		9.014	RPC
4	1									2	114	RAW
3.509	0.877									1.754	100.000	RPR
1.351	0.143									40.000	4.567	RPC
226	504	50	24	31	15	29	168	7		2	1059	RAW
21.341	47.592	4.721	2.266	2.927	1.416	2.738	15.864	0.661		0.189	100.000	RPR
76.351	72.310	32.258	66.667	63.265	5.119	27.619	43.979	7.071		40.000	42.428	RPC
42	173	94		9	74	6	178	76		1	653	RAW
6.432	26.493	14.395		1.378	11.332	0.919	27.259	11.639		0.153	100.000	RPR
4.189	24.821	60.645		18.367	25.256	5.714	46.597	76.768		20.000	26.162	RPC
	1		2	9	23	1	16				52	RAW
	1.923		3.846	17.308	44.231	1.923	30.769				100.000	RPR
	0.143		5.556	18.367	7.850	0.952	4.188				2.083	RPC
24	13	7	9		12		13				89	RAW
26.966	14.607	7.865	10.112		13.483		14.607				100.000	RPR
8.108	1.865	4.516	25.000		4.096		3.403				3.566	RPC
	1	4					7	15	34		61	RAW
	1.639	6.557					11.475	24.590	55.738		100.000	RPR
	0.143	2.581					1.832	15.152	91.892		2.444	RPC
			1								1	RAW
			100.000								100.000	RPR
			2.778								0.040	RPC
296	694	155	36	49	124	38	382	98	37	5	2256	RAW
13.12	30.76	6.87	1.60	2.17	5.50	1.68	16.93	4.34	1.64	.22	100.000	RPR
00.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.000	RPC

APPENDIX G

NEW YORK STATE UNIT OF SERVICE PROJECT PROPOSED UNITS

CRITERIA FOR UNITS

1. Type of Units

   "Planning" Units—Units used to record the kind of activities and materials that go into the provisioning of a service (sometimes called *"Input"* Units)

   "Product" Units—Units used to record the results of a service (sometimes called "Output" Units)

2. A unit must be described such that it can be *recorded.*
3. The unit should be readily understood by the worker providing the service and consistent with local practice.
4. A unit must be *measurable.*
5. A unit must be supportive of the objectives in the Comprehensive Annual Services Program (CASP) Plan.

Service Name: Adoption

Planning Units

- One (1) hour of adoptive family recruitment
- One (1) hour of counseling for adoptive parents
- One (1) hour of training for prospective and approved adoptive parents
- One (1) hour of supervision or evaluation of adopted children

Product Units

- One (1) adoptive placement
- One (1) completed adoption
- One (1) adoptive family approved
- One (1) child surrendered

- One (1) hour of assistance in supporting surrender, including instituting legal procedures

Service Name: Adult Education

Planning Units

- One (1) hour of classroom instruction
- One (1) classroom session
- One (1) reading test
- One (1) oral placement test

Product Units

- One (1) completion of literacy course as measured by standard reading test or other approved method
- One (1) enrollment in extended education course

Service Name: Day Care for Children

Planning Units

- One (1) half-day, In-Home care
- One (1) full day, In-Home care
- One (1) half-day, Family Home care
- One (1) full day, Family Home care
- One (1) half-day, Group Home care
- One (1) full day, Group Home care
- One (1) half-day, Day Care Center
- One (1) full day, Day Care Center
- One (1) hour of assessing the need for or arranging for Day Care
- One (1) hour of evaluating, recruiting and licensing, Day Care provider

Product Units

- One (1) parent freed to seek employment
- One (1) parent working or in training for work
- One (1) parent freed to receive medical services
- One (1) child in a protective setting
- One (1) Day Care provider recruited and licensed

Service Name: Educational Services

Planning Unit

- One (1) hour of assessing the need for, arranging for or evaluating the impact of educational services

Product Unit

- One (1) arrangement for counseling or training

Service Name: Employment Services

Planning Units

- One (1) hour of counseling
- One (1) hour of arranging for vocational education or training
- One (1) hour of arranging for supportive services

Product Units

- One (1) arrangement for vocational education
- One (1) arrangement for training
- One (1) employment placement
- One (1) arrangement for supporting services to gain or retain employment

Service Name: Family Planning

Planning Units

- One (1) hour of counseling
- One (1) hour of providing social and educational services
- One (1) hour medical diagnosis or treatment
- One (1) hour of arranging for social, medical and educational services

Product Units

- One (1) arrangement for educational, medical or social services
- One (1) item of printed material distributed
- One (1) plan for optimizing family size
- One (1) medical device or procedure

Service Name: Foster Care for Children

Planning Units

- One (1) medical examination
- One (1) hour of counseling with natural parents
- One (1) hour of special services provided by foster parents
- One (1) hour of assessing the need for or arranging for Foster Care
- One (1) hour of recruiting Foster Care homes or facilities

Product Units

- One (1) placement in Foster Care
- One (1) Foster Care home or facility recruited
- One (1) child returned to own home
- One (1) child freed for adoption

- One (1) hour of supervision or evaluation of a child in Foster Care
- One (1) hour of arranging for other needed services

Service Name: Foster Care for Adults

Planning Units

- One (1) hour of assessing the need for or arranging for Foster Care
- One (1) hour of recruiting Foster Care homes or facilities
- One (1) hour of supervision or evaluation of an adult in Foster Care
- One (1) hour of arranging for other needed services

Product Units

- One (1) placement in Foster Care
- One (1) Foster Care home or facility recruited
- One (1) year of Foster Care

Service Name: Health Related Services

Planning Unit

- One (1) hour of assessing need for, arranging for or following-up of health services

Product Units

- One (1) employed individual
- One (1) client sustaining self-care
- One (1) individual placed in medical institution
- One (1) arrangement for health services

Service Name: Homemaker Services

Planning Units

- One (1) hour of assessing the need for, arranging for or evaluating homemaker services
- One (1) hour of personal care services
- One (1) hour of home management by a trained homemaker

Product Units

- One (1) individual able to resume management of own home
- One (1) family remaining intact
- One (1) individual able to remain in own home

Service Name: Home Management Services

Planning Units

- One (1) hour of assessing the need for, arranging for or evaluating home management services
- One (1) hour of instruction in home management by a caseworker, home economist, or trained homemaker

Product Unit

- One (1) individual with increased capability to manage own home.

Service Name: Housekeeper/Chore

Planning Units

- One (1) hour of assessing the need for, arranging for or evaluating housekeeper/chore services
- One (1) hour of performing light work or household tasks

Product Units

- One (1) individual maintaining employment
- One (1) individual seeking employment
- One (1) individual optimally functioning in own home
- One (1) individual able to remain in own home

Service Name: Housing Improvement

Planning Units

- One (1) hour of arranging for housing repairs
- One (1) hour of searching for alternative housing
- One (1) hour of arranging for alternative housing
- One (1) hour of arranging for other services

Product Units

- One (1) safe and/or adequate house
- One (1) alternative house identified
- One (1) alternative housing arrangement

Service Name: Information & Referral

Planning Units

- One (1) referral
- One (1) provision of information
- One (1) hour of assessing, need for, arranging for and following-up service by a community resource

Product Units

- One (1) referred individual
- One (1) individual initiating service with a community resource
- One (1) informed individual
- One (1) directory of resources

- One (1) hour of identifying community resources, preparing or updating community resource directory

prepared and/or maintained

Service Name: Preventive Services

Planning Units

- One (1) hour of counseling
- One (1) meal prepared and delivered
- One (1) hour arranging for other services
- One (1) hour assessing the need for, arranging for or evaluating preventive counseling
- One (1) hour of day treatment

Product Units

- One (1) individual able to optimally function in own home
- One (1) stabilized family situation

Service Name: Protective Services for Adults

Planning Units

- One (1) hour of identification, investigation, or diagnosis of potential client's situation
- One (1) hour of arranging for other services
- One (1) hour of counseling
- One (1) hour of functioning as a conservator, representative or protective payee

Product Units

- One (1) adult able to remain in community setting
- One (1) adult placed in an institutional setting
- One (1) adult with increased capacity for self-care
- One resolution of risk situation

Service Name: Protective Services for Children

Planning Units

- One (1) hour of investigation
- One (1) hour of diagnosis
- One (1) hour of counseling
- One (1) hour of shelter identification
- One (1) hour of arranging for emergency shelter
- One (1) hour of legal representation

Product Units

- One (1) stabilized family situation
- One (1) placement in emergency shelter
- One (1) resolution of risk situation
- One (1) shelter identified

- One (1) hour of arranging for other services
- One (1) day of emergency shelter

Service Name: Social Adjustment

Planning Units	*Product Units*
One (1) hour of assessing the need for, arranging for and evaluating recreational and other leisure time programs One (1) hour of assessing need for, arranging and evaluating need for other services	One (1) child behavior problem resolved One (1) parent-child conflict resolved One (1) personal or family dysfunctioning corrected One (1) marital conflict resolved One (1) blind client functioning optimally One (1) handicapped person functioning optimally One (1) volunteer placed

Service Name: Social Group Services for Senior Citizens

Planning Units	*Product Unit*
One (1) hour of assessing the need for socialization and companionship services to senior citizens One (1) hour of providing socialization and companionship services to senior citizens	One (1) hour of senior citizen participation

Service Name: Transportation

Planning Units	*Product Unit*
One (1) hour of arranging for transportation services One (1) one way trip using public transportation One (1) one way trip using private transportation	One (1) individual transported to community services

Service Name: Unmarried Parents

Planning Units

- One (1) hour of counseling to unmarried parents
- One (1) hour of arranging for care of mother and child
- One (1) hour of arranging for other services

Product Units

- One (1) resolution of the pregnancy
- One (1) legally identified father who assumes support payments
- One (1) plan for future care of a child

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